


WESTERN CONFERENCE
of the Evangelical Church

Application for Sabbatical Funds

Name: _____ Phone: _____

Address: _____

Email: _____

Proposed Period of Sabbatical: _____

Funds Needed During Sabbatical Leave: _____

Funds Provided by Local Congregation: _____

Funds Requested from the Board of Pastoral Health: _____

When are the funds needed? Where should they be sent: _____

Details about the Sabbatical:

Please, thoughtfully, give details about the proposed Sabbatical. In one to two paragraphs answer the following questions and attach to this application:

- 1) Knowing that a Sabbatical has various purposes, what, is the project or purpose of your proposed Sabbatical? What are your goals, actions, plan, and purposes?
- 2) How will this project or purpose benefit you, your ministry, and your local congregation?
- 3) What is the timeframe of the Sabbatical? Not only the time that you will be out of the office but what do you expect your schedule to be during your proposed Sabbatical?
- 4) What do you hope to accomplish during your Sabbatical and how do you hope to be refreshed during this time? In other words, what do you hope changes in your life during the Sabbatical?
- 5) Who will oversee your Sabbatical?
- 6) Please share any other plans or possibilities (writing, presentations, etc.) you hope will be a part of or emerge from your proposed Sabbatical.

Signature

Date