



**Form ref: DAF/GAF4**

**District Reference No.....**

**District Advance Fund – Grant Application Form**

**Training Grants for an Individual Presbyterian or Deacon**

<b>Name:</b>	
<b>Address:</b>	
<b>Telephone:</b>	<b>E-mail:</b>
<b>Circuit:</b>	<b>Office held:</b>
<b>Title of course you would like to attend:</b>	
<b>Name of provider:</b>	
<b>Duration:</b>	
<b>Dates:</b>	
<b>Cost:</b>	
<b>Grant sought:</b>	
<b>Contribution from circuit:</b>	

**In what ways do you expect the course to make you more effective in the role you exercise in the life of the church and equip you for ministry?**

**Any other comments to support the application?**

**Application supported and approved by:**

Circuit Minister/ Circuit Superintendent/ Assistant Chair

**Note:** Completed form to be sent to the District Grants Secretary:  
Rev Alan Thorpe, 8 Eastgate Gardens, Guildford, Surrey, GU1 4AZ  
Contact phone 01483 575432 e-mail [grants@methodistsoutheast.org.uk](mailto:grants@methodistsoutheast.org.uk)

*Data collected will be used for audit purposes within the District.*