

**METHODIST CHURCH**

**Chair of District:**

Revd Richard Andrew

**DISTRICT BURSARY APPLICATION FORM**

|  |  |
| --- | --- |
| Applicant’s Name: |  |
| Address: Postcode: |  |
| Telephone number(s) | Landline:Mobile: |
| Email address: |  |
|  |  |
| Overview of the project/conference/course or equipment150 words maximum |  |

|  |  |
| --- | --- |
| Estimated number of children/young people involved: [if applicable] | Children:Young People: |
| Numbers of adults/leaders involved: [if applicable] |  |
| Costs involved:**OUTLINE ALL COSTS**[Attach quotes or programme costs] |  |
| **TOTAL COST:** |  |
|  |  |
| How much are you asking the Bursary fund for: |  |
|  |  |
| What other funding have you received and from whom: | 1.2.3. |
| What funding applications are pending and for how much: | 1.2.3. |
| I confirm that the above details are accurate at the time of completing this application form.If there are any significant changes to the project while this application is being processed I will notify the Bursary Fund Executive as soon as possible.**Applicant signature: Date:****Role/position:** |

**TWO REFEREES ARE REQUIRED. ONE REFEREE SHOULD BE A MINISTER**

|  |  |
| --- | --- |
| 1.Referee’s name**MINISTER** |  |
| Address: Postcode: |  |
| Telephone number(s) | Landline:Mobile: |
| Email address: |  |
| Do you support this application?  **Y** or **N**Explain your reply in150 words maximum |  |

**The second referee could be from a partner church or organization or someone with knowledge**

**of the group or individual**

|  |  |
| --- | --- |
| 2.Referee’s name |  |
| Address: Postcode: |  |
| Telephone number(s) | Landline:Mobile: |
| Email address: |  |
| Do you support this application?  **Y** or **N**Explain your reply in150 words maximum |  |

**Applications should be sent by email to:**

**maspey@globalnet.co.uk**

**Postal applications should be sent to:**

**Mr. M Aspey The Beeches, Horswell Gardens, Spennymoor. DL16 7AA**