



**DIOCESE OF SOUTHERN VIRGINIA**  
**Committee on Continuing Education for Clergy**  
**Clergy Continuing Education Grants**

**I. PURPOSE**

- A. It is desirable that each member of the clergy take a study leave, at time intervals consistent with the policy of the diocese, for the purpose of his/her continuing education. Clergy are also encouraged to pursue other educational opportunities which do not necessarily require study leave.
- B. The primary interest of the committee is to support programs that are essentially theological in emphasis. This does not, however, rule out programs designed for training in special ministries, or those which would in other ways enhance the effectiveness of an individual in his or her ministry. Though the committee favors structured, disciplined programs, unstructured, imaginative or unconventional programs will be given due consideration. In short, the committee attempts to be as flexible as possible to best serve the various needs of the clergy in their efforts to continue their education.

**II. WHO IS QUALIFIED TO APPLY FOR A GRANT?**

With the exception of those within the first year of their ordination, all clergy serving in the Diocese of Southern Virginia are qualified to submit requests.

**III. FACTORS CONSIDERED IN AWARDING GRANTS**

Among those factors the committee members consider in their review of the applications are: date of ordination, length of time in this diocese, present position held, purpose for which funds are requested, dates and location of the intended study, benefit to be derived from the experience, anticipated cost, whether or not the individual has received other grants for continuing education, the number of requests being considered by the committee, and the availability of funds. Study periods of a week or longer have a higher priority than a two or three-day conference.

**IV. APPLICATION PROCESS**

- A. Obtain an application form from the Clergy Resources page on the diocesan website in ample time to meet the deadline date for its return. Return the completed application to the Office of the Canon to the Bishop Diocesan.

- B. Particular attention must be paid to deadline dates. All applications must be returned to the diocese by **April 1** or **October 1** to be considered at the April or October meetings respectively. If the continuing education experience is to occur between November and April, the application will be considered in October. If the continuing education experience is to occur between May and October, the application will be considered in April.
- C. A single grant will not be made to cover a multi-year program. In such cases, repeat requests must be made to the committee, as may be appropriate.
- D. Consideration will only be given to those fully completed applications. If the application is not legible, it will not be considered.
- E. Per Diocesan Canon VII.4(f) congregations, including clergy and lay members, will not be eligible for grants from the Diocese until the preceding two calendar years' audit reports have been provided to the Diocese.

## **V. COMMITTEE MEETINGS AND COMPOSITION**

- A. Appointed by the bishop, the committee is composed of both clergy and lay persons.
- B. The committee meets in April and October each year to evaluate the requests for grants and to allocate the available funds. If necessary, other meetings may be called by the chairperson, or business matters may sometimes be handled via telephone or email.
- C. A copy of every grant request is made available to each committee member prior to the scheduled meeting for personal review and his/her recommendation and discussion at the scheduled meeting time.

## **VI. FINANCIAL RESPONSIBILITIES**

- A. Vestries are encouraged to include in their budgets funds to support continuing education and at the same time provide for the cost of supply clergy as may be necessary.
- B. Where appropriate and possible, it is expected that the parish or other employer will fund the major portion of the cost. The applicant should fund what he/she is able. The committee will provide all the reasonable support possible.



## DIOCESE OF SOUTHERN VIRGINIA

### Committee on Continuing Education for Clergy

#### APPLICATION FOR A GRANT

*Grants are considered twice a year: April 1 and October 1*

*Confidential: for use of committee only*

Date of application: \_\_\_\_\_

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Church Name & Address: \_\_\_\_\_

\_\_\_\_\_

Church Telephone: \_\_\_\_\_

Date of Ordination to Diaconate: \_\_\_\_\_ To Priesthood: \_\_\_\_\_

Present Position: \_\_\_\_\_

Years in Present Position: \_\_\_\_\_ Years in Diocese: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Number of Children: \_\_\_\_\_ Their Ages: \_\_\_\_\_

Paying tuition or supporting any children in college? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your spouse/partner work outside the home? \_\_\_\_\_

Any unusual family expenses you feel the committee should know about:

---

---

---

Regarding the educational event you propose, please provide the following:

Course title or event: \_\_\_\_\_

Location: \_\_\_\_\_

Dates: \_\_\_\_\_

If a varied sabbatical, please describe: \_\_\_\_\_

---

---

---

What are your specific long-range continuing education goals, and how does this program fit into these goals?

---

---

---

What have you done in continuing education toward fulfilling these goals?

---

---

---

Is this a new direction for you? \_\_\_\_\_ Comments: \_\_\_\_\_

---

---

Have you ever been through a "mid-career assessment" conducted by a professional agency equipped to do such an assessment? If yes, where and when?

---

---

Have you received a grant from this committee before? \_\_\_\_\_

If yes, date of last grant: \_\_\_\_\_ Amount received \$ \_\_\_\_\_

Concerning this request:

What is the cost of the event itself? \$ \_\_\_\_\_

Other costs you know about or anticipate:

Transportation \$ \_\_\_\_\_

Room & board \$ \_\_\_\_\_

Books \$ \_\_\_\_\_

Additional costs \$ \_\_\_\_\_

Details of any additional costs:

---

---

Subtotal of these costs \$ \_\_\_\_\_

Grand Total of costs \$ \_\_\_\_\_

Portion your parish/institution will pay \$ \_\_\_\_\_

Portion of the costs you will pay \$ \_\_\_\_\_

Money from other sources \$ \_\_\_\_\_

Amount requested from this committee \$ \_\_\_\_\_

Total funding (should equal Grand Total above) \$ \_\_\_\_\_

Any additional comments you think would help the committee in making its decision on your application:

---

---

---

---

Required signatures for the above application for a grant from the Committee on Continuing Education for Clergy:

Clergy Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Senior Warden Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note: A course evaluation report is required not later than thirty days following completion of the event supported by this grant (form is attached).**

**For committee use:**

Total number of applications being considered: \_\_\_\_\_

Total dollar amount requested by applications received \$ \_\_\_\_\_

Total funds available to support these requests \$ \_\_\_\_\_

Amount of this grant request \$ \_\_\_\_\_

Amount of grant approved by committee action \$ \_\_\_\_\_

Preceding two calendar years' audit reports received? \_\_\_\_\_

Signature of committee chair: \_\_\_\_\_ Date: \_\_\_\_\_

Date course evaluation report received: \_\_\_\_\_

**DIOCESE OF SOUTHERN VIRGINIA**  
**COMMITTEE ON CONTINUING EDUCATION FOR CLERGY**

Evaluation Report of My Recent Course of Study/Sabbatical\*

*Please submit within 30 days of study completion to the chair of the continuing education committee.*

Name: \_\_\_\_\_

Your present position: \_\_\_\_\_

Dates of event(s): \_\_\_\_\_

Describe the educational event(s) in which you were engaged. If part of a sabbatical, please explain more fully:

---

---

---

---

---

---

---

---

Rate the value of the experience 1 – 6 (6 being the most valued) \_\_\_\_\_

Would you recommend others pursue a similar program? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give your reasons: \_\_\_\_\_

---

---

---

---

If no, please explain why: \_\_\_\_\_

---

---

---

---

*\* If you care to elaborate in any area, please feel free to add additional sheets.*

How has your ministry been enhanced by this experience?

---

---

---

---

---

---

---

How do you expect your congregation to benefit from your study?

---

---

---

---

---

---

---

Any further comments you wish to make? \_\_\_\_\_

---

---

---

---

---

---

---

Signature: \_\_\_\_\_ Date: \_\_\_\_\_