



St. Paul Lutheran Church & School

Endowment Funds Request

Return this form to the church office or email to t.anderson@stpaulbonduel.com

Name:	Date:
Address:	

Educational

Current Job Title:	Name of Seminar, Conference or Coursework:		
Sponsoring Organization:	Where Being Held:	Start Date:	End Date:

Estimate of Cost

Registration Fee:	Transportation, Meals & Lodging:	Total:
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What convinces you that you should attend this program?

How do you expect to do your job differently when you return?

Applicant's Signature:

Approval

Date approved:	Amount Approved:	Chairman signature:	Treasurer signature:
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