

SABBATICAL LEAVE FUND APPLICATION

NAME OF PASTOR/STAFF:

POSITION:

ADDRESS:

CHURCH/ORGANIZATION:

START AND END DATE OF REQUESTED LEAVE:

CHEQUE or E-TRANSFER MADE PAYABLE TO:

TO BE RECEIVED BY (date):

BOARD CHAIR:

EMAIL:

PH:

SIGNATURE OF BOARD CHAIR:

Note: If cheque is made payable to the pastor, a T4A will be issued amounting to two-thirds of the total sabbatical withdrawal amount. If cheque is made payable to the church, this must be specified clearly in the church's approval letter.

APPLICATION FROM MEMBER CONTAINS:

- 1) PLAN FOR REQUESTED SABBATICAL LEAVE (please describe as discussed with the Regional Minister):

- 2) APPROVAL BY REGIONAL MINISTER:

NAME:

REGION:

SIGNATURE:

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COPY OF BOARD APPROVED MOTION ON CHURCH LETTERHEAD ATTACHED

Please return completed application with supporting documentation to Louanne Haugan at lhaugan@cbwc.ca