

Council on Clergy Development

Board of Ordained Ministry

California-Nevada Annual Conference of The United Methodist Church

Guidelines for Supportive Services Grant

The Supportive Services of the Board of Ordained Ministry has limited resources from the Ministerial Education Fund for personal counseling. The following limitations apply to those otherwise eligible:

Limitations:

- If you are enrolled in the Conference Health Plan [HMO], you are NOT eligible for these funds.
- If you are enrolled in a health plan that offers outpatient counseling services, you are NOT eligible for these funds.

If you are not limited by the above, then funds are available to:

- All clergy members of the California-Nevada Annual Conference who are under Episcopal appointment.
- Widows/widowers of clergy.
- The immediate families of the above.

Persons under joint review, investigation, or who are on trial may avail themselves of the fund with the approval of the District Superintendent.

Amount available:

- Eligible applicants may receive up to one half of the fee paid with a maximum of \$1,500 per family for 12 months.
- Eligibility renews on July 1 each year.

Application Procedure:

- Complete the application and send it with a copy of the counseling bill to:

Rev. Don Lee
First United Methodist Church
2100 J Street
Sacramento, CA 95816
Phone: 916.446.5025
Fax: 916.446.3463
revdonlee@gmail.com

Requests for reimbursement may be submitted monthly. All checks will be mailed directly to the applicant. Under special circumstances the \$1,500 maximum may be extended. Other funds may be available through the Bishop's office. Contact a District Superintendent for more information.

5.1.2011

Council on Clergy Development
Board of Ordained Ministry
California-Nevada Annual Conference of The United Methodist Church

Application for Supportive Services Grant

Date: _____

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

My Health Plan does not cover Outpatient Counseling Services, making me eligible for these funds.

I am requesting Ministerial Education Funds for ____ counseling sessions totaling \$ _____. I understand I will be reimbursed half this amount and that the check will be sent to me directly for disposition. I have included a copy of the invoice.

Signed _____

Return to:

Rev. Don Lee
First United Methodist Church
2100 J Street
Sacramento, CA 95816
Phone: 916.446.5025
Fax: 916.446.3463
revdonlee@gmail.com

5.1.2011