



THE EPISCOPAL
DIOCESE OF OHIO

Application for Sabbatical Grant

Clergy and Lay Professionals

Please read the guidelines below carefully before completing the application. If you have questions, call or email Canon Russ Tripi at 216-774-0416 or rtрпи@dohio.org.

Mail or email completed application to: Commission on Ministry
ATTN: Canon Russ Tripi
2230 Euclid Avenue
Cleveland, OH 44115-2499
rtрпи@dohio.org

Guidelines:

1. **Purpose:** The goal of a Sabbatical Grant is to assist the applicant in stepping away from work duties to fulfill a specific plan for professional and personal growth, renewal, and reflection. Generally, it is expected that (1) the leave will be for a minimum of six weeks; (2) the applicant will be away from the congregation/work locale; (3) the applicant will use the leave to follow a planned, coherent program of professional and personal development; and (4) the program will benefit the congregation or work place.
2. **Eligibility:** Lay professionals serving full-time in a parish in the diocese and clergy canonically resident and who are in active ministry in the diocese are eligible to apply for Sabbatical Grants. The Grant Review Committee of the Commission on Ministry does not generally fund terminal sabbaticals, and it is expected that the grant recipient will return to his or her place of work for at least one year. If the recipient of a grant should choose to leave in less than a year after returning from a sabbatical, the Grant Review Committee may request that a portion of the funds provided be returned.
3. **Deadlines:** Applications for Sabbatical Grants are due at least 90 days prior to the beginning of the sabbatical. Grants are considered by the Commission on Ministry on a rolling basis. You will receive confirmation of your application receipt and regular status updates.
4. **Limit of Grant:** No individual will be awarded more than \$4,000 for a sabbatical grant. Grants are not intended to cover the full cost of the applicant's expenses. It is expected that the applicant will supply some of the cost and will seek additional support from other sources, such as the congregation or employer or other funds. Grants may

not be used to cover personal stipends, equipment purchases, or parish expenses connected to a sabbatical. Grants may be considered taxable income by the Internal Revenue Service.

5. **Evaluation:** An evaluation letter is expected within two months upon return from the sabbatical. The letter should reflect the application materials and address not only the individual's experience but also the experience of the parish or organization during the sabbatical.

6. **Application:** In addition to the application form, a typed, detailed sabbatical proposal of not more than three pages must be submitted. The following information must be included:

- When will the sabbatical begin and end?
- How will your work responsibilities be covered when you are away?
- How is your congregation or organization being prepared for your sabbatical?
- What is the financial agreement between you and your congregation or employer during the sabbatical? Be as specific as possible.
- Where will you spend your sabbatical?
- What do you propose to do during your sabbatical? Be as specific as possible.
- What goals do you have for the sabbatical?
- How will the sabbatical be of benefit to your congregation or organization and the diocese?
- A copy of a vestry resolution supporting the sabbatical or a copy of the minutes from the vestry meeting when a resolution of support was passed.

7. **Change of Plans:** If your sabbatical plans should change between the awarding of a grant and the conclusion of the sabbatical, please contact Canon Russ Tripi. Depending on the nature of the change, a letter of explanation may be requested.



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Name:	Date:
Address:	
City, State, Zip:	
E-mail Address:	
Phone (o):	(h):
Position:	
How many years have you served in the Diocese of Ohio?:	
How much are you requesting via this grant?: \$	

Please complete the following:

PROGRAM COSTS		FUNDING SOURCE	
Fees <i>(specify)</i> :	\$ \$ \$	Provided by Applicant:	\$
Travel:	\$	Provided by Congregation(s) or Institution:	\$
Room & Board:	\$	Other <i>(please specify)</i> :	\$ \$ \$
Other <i>(please specify)</i> :	\$ \$ \$	Grant Request:	\$
TOTAL COST:	\$	TOTAL FUNDS:	\$

Please list any grants you have received in the past three years from the Grant Review Committee of the Commission on Ministry?

DATE	TYPE OF GRANT	AMOUNT	PROGRAM TITLE
		\$	
		\$	
		\$	
		\$	

For Office Use:

Date received: _____ Acknowledgement sent: _____

Reviewed by the Grant Review Committee: _____

Approved for \$ _____ Denied: _____

Check requested: _____ Letter and check mailed: _____

Evaluation letter received: _____

COMMENTS: