

**DIOCESE OF WESTERN MASSACHUSETTS  
APPLICATION FOR RENEWAL LEAVE GRANT FOR DIOCESAN CLERGY**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

EMAIL: \_\_\_\_\_

The Bishop requests the following information to evaluate your application for a diocesan grant.

1. I have been canonically resident in the Diocese of Western MA since \_\_\_\_\_  
(date and year)
2. I have been serving \_\_\_\_\_ since \_\_\_\_\_  
(parish, mission, or diocesan staff position) (date and year)
- 2A. I am: \_\_\_ Full time \_\_\_ Three-quarter time \_\_\_ Half time \_\_\_ One-quarter time
3. Is this your first application for a renewal leave? \_\_\_\_\_  
If not, what was the date of your last renewal leave? Year \_\_\_\_\_ Months \_\_\_\_\_
4. Your renewal leave and vacation schedule:
  - A. I plan to commence my leave on \_\_\_\_\_ (date and year)
  - B. I plan to conclude my leave on \_\_\_\_\_ (date and year)
  - C. Do you plan to take your vacation in conjunction with your renewal leave?  
Yes \_\_\_\_\_ No \_\_\_\_\_
  - D. If yes, what portion of the leave will be chargeable to your usual vacation?  
\_\_\_\_\_
  - E. If no, when will you take your vacation? \_\_\_\_\_

5. I have advised the wardens and parish of my intention to apply for this leave. I have received the Vestry's approval.

Date of vestry meeting \_\_\_\_\_

Signature of Clerk \_\_\_\_\_

6. In preparation for this leave, I have made the following tentative arrangements with the Parish, supply clergy, my family, etc.:



10. The following is the budget proposed for supply clergy during my absence:

Salary \$\_\_\_\_\_ Car \$\_\_\_\_\_ Housing \$\_\_\_\_\_ Other \$\_\_\_\_\_

(The parish will budget for supply clergy during the priest’s leave. )

11. The following is the budget proposed for my renewal leave:

A. **Expenditures\***

B. **Resources**

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

Parish Grant to You \$\_\_\_\_\_

Housing \$\_\_\_\_\_

Personal Contribution \$\_\_\_\_\_

Tuition \$\_\_\_\_\_

Other Grants \$\_\_\_\_\_

Other \$\_\_\_\_\_

Other Sources \$\_\_\_\_\_

TOTAL EXPENDITURES \$\_\_\_\_\_

MINUS RESOURCES \$\_\_\_\_\_

DEFICIT \$\_\_\_\_\_

(The parish will provide \$2,500 in expense money to the priest)

C. AMOUNT OF DIOCESAN GRANT REQUESTED FOR YOUR RENEWAL LEAVE \*\* \$\_\_\_\_\_

\* Please explain these expenditures in detail below and on an attached sheet if necessary

\*\* Not to exceed \$2,500

**PLEASE SUBMIT APPLICATION BY SEPTEMBER 30<sup>TH</sup> OF THE YEAR PRIOR TO YOUR RENEWAL LEAVE TO:**

Karen Warren, Administrative Assistant to the Canons to the Ordinary

Diocese of Western Massachusetts

37 Chestnut Street, Springfield, MA 01103