

POAMN

Presbyterian Older Adult Ministries Network Conference

SAVORING THE JOURNEY

JUNE 5-8, 2018

Zephyr Point Presbyterian Conference Center

Application for Partial Scholarship

The Presbyterian Older Adult Ministry Network (POAMN) offers scholarships of \$250 to first-time participants as a way of promoting growth in this important network of older adult ministry resource persons. The applicant may represent a local congregation, a Presbytery or a Synod. Applications should be sent to POAMN, P.O. Box 700311, Oostburg, WI 53070, gnyhuis@frontier.com, or faxed to (920) 564-3051 attention Ginny Nyhuis. **Applications should be received no later than May 18th 2018. Notification of scholarship awards will be made by May 24st.** Please complete the questions as fully as possible. You may attach additional sheets if necessary.

Scholarships will be granted on the basis of the uniqueness and creativity exhibited in the project design. Following are examples of model ministries that have been successful:

- 1) Carry out a needs assessment in my congregation during the next 12 months.
- 2) Commit to a ministry of visitation in a nursing home.
- 3) Develop a plan for the study of issues by older adults as well as social events in the congregation.
- 4) Develop a resource that will assist members of the congregation in planning for issues they will face as older adults, such as caregiving, advance directives, planning a memorial service.

POAMN
PRESBYTERIAN OLDER ADULT MINISTRIES NETWORK

2018 CONFERENCE SCHOLARSHIP APPLICATION FORM

Deadline for applications: May 18, 2018

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: home: () _____ **office:** () _____

E-mail: _____

Synod: _____

Presbytery: _____

Church: _____

POAMN membership status: _____current _____new _____non-member

Briefly describe your interest and involvement in Older Adult Ministry:

What are your expectations for attending the POAMN conference?

PROJECT PROPOSAL

Provide a statement describing the purpose of your project:

Describe your target audience:

Project goals:

Provide a project time-line:

Method of Evaluation:

Please return this application to:

**POAMN
c/o Ginny Nyhuis
P.O. Box 700311
Oostburg, WI 53070**

**615-426-1545 Fax: 920-564-3051
Email: gnyhuis@frontier.com**