Applicant Name

Address

Phone number

e-mail

I have been a member of the following Congregation for years

My Process Improvement Proposal (10 words or less) is:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Warden Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clergy Signature Date

Send your application and make inquiries to:

Episcopal Diocese of Chicago

Keith Kampert

kkampert@episcopalchicago.org

Treasurer

65 East Huron Street

Chicago, IL 60611-2728

312.751.4201 Office

312.787.5872 Fax

**\*must be received by March 31st.**