APPLICATION FORM FOR A LOAN FROM THE ILLINOIS CONFERENCE, ILLINOIS SOUTH CONFERENCE & CCIW REGION INTENTIONAL INTERIM MINISTRY SUPPORT FUND FOR BASIC EDUCATION IN INTENTIONAL INTERIM MINISTRY

Name of Applicant	
Address	
	State Zip
Tel. (Res)	(Off)
E-mail	FAX
Ministerial standing in (name) Association	Region
It is agreed that (name)	
Dates of applicant's education courses are:	Phase 1
The applicant agrees to repay this loan within Unpaid balances after two years will accrue it	Phase 3
In one payment or in _	installments of \$
Loan payments to be sent to:	Business Manager Illinois Conference, UCC 1840 Westchester Blvd., Suite 200 Westchester, IL 60154-4382
Date loan paid to Interim Ministry N	Network
Date loan to be repaid to this Fund	
Applicant	Date
Association/Region Minister	Date
ATIIM Representative	Date

One copy of form should be retained by applicant: other copies to ATIIM Steering Committee which is responsible for monitoring repayment of the loan; to the Association/Conference/Regional Minister, and Illinois Conference Business Manager.