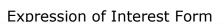
Study Leave





Name				
Current Post & and date licensed.				
Contact Details (including parish number)				
Date of Ordination				
Date of last Study Leave				
Status of Parish Share				
Date of MDR and Objectives that will be supported by Study leave				
Proposed date of Study Leave				
Have you consulted your:	Comments			
Area Dean Y/N Curate/SSM colleagues Y/N PCC/DCC Y/N Church Warden(s) Y/N If you are an Training Incumbent, the PIME officer Y/N Reader in Training Y/N				
Brief description of subject / project				
	Please continue of separate sheet if needed.			

