



THE EPISCOPAL DIOCESES OF EASTERN MICHIGAN AND WESTERN MICHIGAN  
**ACADEMY FOR VOCATIONAL LEADERSHIP**  
**APPLICATION FORM - 2024 - 2025 Academic Year**

Name \_\_\_\_\_  
(Last) (First) (Middle)

Preferred Pronouns \_\_\_\_\_

Home Address

\_\_\_\_\_  
(Street, Apt. #)

\_\_\_\_\_  
(City, State, ZIP code)

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Parish \_\_\_\_\_ City \_\_\_\_\_

Highest level of formal education completed \_\_\_\_\_

Unisex T Shirt Size \_\_\_\_\_

Participation in the Academy for Vocational Leadership requires a good amount of technical knowledge. Much of our course work requires utilizing online course work that you must be able to access. Instructions for utilizing the Iona website are given in the handbook. Much of your homework will need to be completed using a computer and word processor and having the ability to submit the work to the faculty. You will also need to be able to use Zoom for online weekends which requires a computer with a camera. Although this can be done using a phone, screen sharing will be too small to be useful.

**Essays (one page each; attach additional pages to this form)**

1. Why do you want to enroll in this program? How do you expect your ministry to change after completion?
2. Please introduce yourself. What is important to you? What does your daily life look like? What about your history is important to share?

**Signatures:**

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Applicant

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Rector or Other Clergy

-----  
Date

-----  
Date

Please return to: Rev. Canon Tracie Little ([tlittle@eastmich.org](mailto:tlittle@eastmich.org)) or Diocese of Eastern Michigan, 124 N. Fayette St., Saginaw, MI 48602.

**Deadline to apply: July 15, 2022**



COVID-19 Vaccination: \_\_\_ yes \_\_\_\_\_date (mo/yr) \_\_\_ no

**Medication:**

\_\_\_ I do not take medication on a routine basis.

\_\_\_ I take routine medication (include vitamins) as noted below.

Name of Medication	Reason for Taking It	Dose Given

Physician's name: \_\_\_\_\_ Office Phone (\_\_\_\_\_) \_\_\_\_\_

**Insurance Information:**

Full Name of Insured Person \_\_\_\_\_

Carrier or Plan Name \_\_\_\_\_ Group # \_\_\_\_\_

**Emergency Contact:** Whom do you want us to contact in an emergency?

First Contact: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Relationship to You: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Relationship to You: \_\_\_\_\_

**Authorization for Health Care:**

This health history is correct insofar as I know. I acknowledge that I am capable of participating in the program of the Academy for Vocational Leadership. I understand that my health information will be used by the Leadership Team only in providing care to me in an urgent medical situation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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**Endorsement for Study in the Academy for Vocational Leadership**

**To: The Bishop and the Director of the Coppage-Gordon School for Ministry**

We, whose names appear below, certify that \_\_\_\_\_  
is an adult communicant in good standing of \_\_\_\_\_  
\_\_\_\_\_ (congregation).

We endorse this person to pursue study in the Academy for Vocational Leadership  
because: (herein the reasons are stated)

We pledge to support this person financially and by being involved in her/his  
formation both individually and as a congregation.

\_\_\_\_\_  
Signed, Rector or Other Clergy

**Signatures of Vestry Members**

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

I hereby certify that the forgoing certificate was signed at a meeting of the Vestry  
of \_\_\_\_\_ Congregation,  
duly convened on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_ Signed, Clerk of the Vestry



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**WEEKEND DATES - 2024 - 2025 Academic Year**

- August 9 – 11 Opening Retreat and the Discernment Weekend at The St. Francis Retreat Center in Dewitt
- September 6 – 8 at The St. Francis Retreat Center in Dewitt
- October 11 – 13 via Zoom
- November 1 – 3 at The St. Francis Retreat Center in Dewitt
- December 6 – 8 at The St. Francis Retreat Center in Dewitt
- January 10 – 12 via Zoom
- February 14 – 16 via Zoom
- March 21 – 23 at The St. Francis Retreat Center in Dewitt
- April 25 – 27 via Zoom
- May 16 – 18 at The St. Francis Retreat Center in Dewitt
- June 20 – 22 at The St. Francis Retreat Center in Dewitt



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**Academy Fees and Financial Resources**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Fees for the Academy for Vocational Leadership are \$4,300 per year with one half due by November 1 and one half due by April 1.

I have the following funding available to pay fees for the Academy for Vocational Leadership:

Scholarship from Diocese: \_\_\_\_\_

Financial Aid from my Congregation: \_\_\_\_\_

Personal: \_\_\_\_\_

Total: \_\_\_\_\_