



**GUIDELINES FOR THE
NATIONAL ASSEMBLY 2019 TRAVEL ASSISTANCE
APPLICATION, SELECTION & PAYMENT PROCESS**

TO APPLICANTS:

- 1) Register for National Assembly by completing the NA Registration Form by the due date.
- 2) Pay the initial NA registration deposit or request a deferment of the registration deposit on your NA Travel Assistance application. If you request a deferment of the registration deposit until after the awards are determined, your initial registration deposit will be due by February 1, 2019. The Travel Assistance award cannot be used to pay your registration fee. If your initial registration deposit is not received by February 1, 2019 your registration will be canceled and you will have to re-register subject to availability.
- 3) Complete the NA Travel Assistance Application and return it to your Diocesan President by **DECEMBER 1, 2018** (If your diocese does not have a President then return the application to your Branch Advisor/Leader.)

The award is to help pay the cost of transportation to/from National Assembly.

You must submit an estimate of what the cost of your transportation will be - car, bus, train, airplane.

The award is **not** to help pay for the NA registration fee.
- 4) You must confirm that your Diocesan President (or Branch Advisor/Leader) has scanned and emailed your Application and score sheet to the NA Travel Assistance Committee Chairperson by **December 7, 2018**.
- 5) The Committee will notify the applicants of the NA Travel Assistance awards by **December 21, 2018**.
- 6) NA Travel Assistance checks will be sent to the Diocesan Treasurers for disbursement in **January, 2019**. If your diocese does not have a Treasurer then checks will be sent to your Branch Advisor/Leader.
- 7) Award Recipients shall submit travel reimbursement requests and receipts to their Diocesan Treasurer (or Branch Advisor/Leader).

TO DIOCESAN PRESIDENTS & BRANCH ADVISORS/LEADERS:

1. By **December 1, 2018** the Applicants must:
 - a. hand deliver or scan and email the Travel Assistance Application to their Diocesan President (or Branch Advisor/Leader if there is no diocesan president.)
 - b. register for NA 2019.
 - c. pay the registration deposit or request a deferment.
2. By **December 7, 2018**, Diocesan Presidents) must:
 - a. confirm the applicants have registered for NA
 - b. confirm the applicants have paid the first deposit or requested a deferment



**NATIONAL ASSEMBLY 2019
TRAVEL ASSISTANCE APPLICATION
Girls Friendly Society/USA**

Due December 1, 2018 to the Diocesan President

APPLICATION DATE _____

PERSONAL DATA

NAME of APPLICANT _____ EMAIL ADDRESS _____

FULL ADDRESS _____

HOME TELEPHONE NUMBER INCLUDING AREA CODE _____

CELLPHONE NUMBER INCLUDING AREA CODE _____

CHECK ONE:

_____ SENIOR GIRL(14-21): Birthdate _____

Years in GFS: _____ Branch: _____

_____ JUNIOR GIRL(12-13): Birthdate _____

Years in GFS: _____ Branch: _____

EVENT/LOCATION

Name of Event: National Assembly 2019

Program Location: Malvern Retreat Center, Malvern, PA

Program Dates: June 30 to July 6, 2019

BRIEF PROGRAM DESCRIPTION

To provide financial assistance for travel expenses for the applicant to attend and participate in the triennial GFS/USA National Assembly. Participation includes but is not limited to attending business meetings, attending and participating in daily worship services, participating in planned group events and attending meals.

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CLERGY ENDORSEMENT

Signature of Clergy _____

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BRANCH ADVISOR'S ENDORSEMENT

(Applicant's name) _____ has been an active member of her GFS Branch for _____ (years).

BRANCH ADVISORS SHOULD BE CERTAIN THAT THEIR GIRLS AGREE TO THE FOLLOWING:

I, _____ (Applicant), agree to write an article about my experience and send it to Lisa-Jo Woods-Kriss, NA Travel Assistance Committee Chairperson. The article can describe my experiences, or the impact of one particular event, or a new friendship. I will submit the article during NA or within one week after NA. Failure to submit the article by the deadline may impact on my eligibility for future travel assistance.

Signature of Applicant _____ Date _____

Noted by the Branch Advisor _____ Date _____

COSTS

TRAVEL (airfare,train,bus, etc.) \$ _____
MISCELLANEOUS COSTS \$ _____
(SPECIFY _____)
TOTAL COST \$ _____

FUNDING SOURCES

FROM PARISH \$ _____
FROM SELF \$ _____
FROM PARENTS \$ _____
FROM OTHER SOURCES \$ _____
(Ex. Your diocese – Specify _____)
BALANCE NEEDED \$ _____

Discuss briefly two ways that your involvement in GFS has impacted your personal or spiritual growth.

What are your expectations of this program, and how do you think it will help you grow personally or spiritually?

NA REGISTRATION, PAYMENT INFORMATION & DEFERMENT OF INITIAL DEPOSIT

You will be required to register for National Assembly but you may request a deferment of the initial registration deposit by completing the section below:

_____ I request a deferment of the registration deposit until after the awards are determined. I understand that my deposit will be due by February 1, 2019 to hold my registration.

_____ I do not request a deferment of the registration deposit and will pay it by the due date indicated in the registration materials.

Applicant: _____

**TO BE COMPLETED BY DIOCESAN PRESIDENT
NATIONAL ASSEMBLY 2019 TRAVEL ASSISTANCE SCORE SHEET**

Applicant: _____

Diocese: _____

Diocesan President: _____

Date: _____

Application received by Diocesan President by deadline:		
Yes (1 point)	No (0 points- If no, please contact the Branch Advisor)	
Application is complete when received:		
Yes (1 point)	No (0 points- If no, please contact the Branch Advisor)	
Applicant has registered for NA and paid/requested deferment of the Registration deposit:		
Yes (1 point)	No (0 points - If no, please contact the Branch Advisor)	
<u>WRITTEN RESPONSES RATING :</u>		
Poor (1 point); Satisfactory (2 points) Outstanding (3 Points)		
Correct use of spelling (so that the writing makes sense when being read).		
Correct use of grammar (so that the writing is understandable).		
Responses address the question asked.		
Response appears unique to the individual.		
<u>GFS INVOLEMENT</u>		
Number of years active in GFS		
<i>TOTAL SCORE =</i>		

Please note if there are any special circumstances that the Committee should be aware of below:

Scan email the Score Sheet and Application by **DECEMBER 7, 2018** to:

**Lisa-Jo Woods-Kriss,
NA Travel Assistance Committee Chairperson
at lisajo62@yahoo.com**