

# APPLICATION FOR ASSISTANCE FROM THE STEPHANIE SHOLTZ WELLNESS FUND

Stephanie Sholtz was a friend to many SDB pastors and their families. Her heart and career choices led her into the counseling profession where she used her training to assist in helping others cope with the stresses of life and ministry. Her tragic death in 2017 was heart wrenching for those who knew and loved her but her legacy of promoting wellness for ministry leaders lives on.

The Stephanie Sholtz Wellness Fund is designated to assist pastoral leaders and their families who desire to seek greater wellness (emotional, spiritual, physical, financial, etc.). This is NOT a fund to help pay off medical debt. Some suggested uses for this fund include (but are not limited to) pastoral counseling, professional counseling, life coaching, dietician consult, personal trainer consult, a credit counselor or a course leading toward wellness. Funds will be paid directly to a wellness provider or in reimbursement of expenses towards a wellness provider (receipts required). Applicants will only be considered at most once a year.

Applications will be considered on a case by case basis. Your application does not allow us access to any more information than you provide us. Please allow at least one month to process the application for a decision before possible payment may occur.

Ownership for this fund rests with the SDB Women's Society but it is administered by the Director of Pastoral Services. This application will be maintained with the strictest of confidence and discretion. All applications will receive communication from the Director of Pastoral Services. All approved applications will require a short

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Name of the Person in SDB Ministry in relation to Applicant: \_\_\_\_\_

Have you contacted any other sources of funding to support this wellness opportunity? Yes  No   
(local church, other grants, family, etc.)

Please describe the wellness provider that you seek funds for and the prescribed course of treatment:  
(Name of provider, type of service rendered, website, how many sessions are recommended, etc. A brochure or pamphlet may be provided.)

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What are the total anticipated costs for this wellness opportunity? \_\_\_\_\_

Please breakdown those costs (cost per session, equipment needed, fees or registration, etc.):

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Where should the check be sent and who should it be made out to? (Reimbursement requires receipts.)

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Please email your completed application to the Director of Pastoral Service at [jpethel@seventhdaybaptist.org](mailto:jpethel@seventhdaybaptist.org).

*If you have any further questions or concerns about the Stephanie Sholtz Wellness Fund, you may contact the President of the SDB Women's Society or the Director of Pastoral Services.*