 South Carolina State Council Resolutions Committee

 *"Promoting Excellence Through Unity"*

 Application for Service of Excellence Award

Name:

 Age: Date of Birth:

Address:

Telephone Number: e-mail:

Name and Address of Church: Pastor's Name:

Date Baptized (Acts 2:38):

Date Received Gift of Holy Ghost (Acts 2:4):

Give a brief synopsis of outstanding service and/or contributions (attach additional sheet if needed)

1. Family
2. Church
3. Community
4. SC State Council

In your own words, why should you be recommended for this award?

(Attach additional sheet if needed.)

Signature of Applicant:

 Date

Signature of Witness or Representative:

 Date

Pastor's Signature:

 Date

District Elder's Signature:

APPROVED BY:

Suffragan Bishop's Signature:

Chairman of Council Signature:

\*Secretary/Registrar:

 Date

The application deadline is November 25, 2018. Submit to: SC State Council Resolutions Committee, Attn:

Evangelist Bernetha. L Moultrie, Chairperson,108 Alida Street, Columbia, SC 29203. (803)605-6621