INTERNATIONAL WOMEN'S COUNCIL

CHURCH OF OUR LORD JESUS CHRIST OF THE APOSTOLIC FAITH, INC

Mother Celestine M. Peters, International Women's Council President

HALL OF FAME NOMINEE FORM

NOMINEES THAT WILL BE INDUCTED WILL RECEIVE A CONGRATULATORY LETTER FROM THE COMMITTEE.

ALL NOMINEES MUST HAVE THE APPROVAL OF LOCAL COUNCIL PRESIDENT, STATE/DIOCESE PRESIDENT, PASTOR AND STATE/BISHOP. PLEASE INCLUDE PHOTO OF NOMINEE.

NAME OF NOMINEE:	

ADDRESS:

_____

STREET ADDRESS

_____

CITY **STATE** **ZIP CODE**

_____

MAILING ADDRESS IF DIFFERENT FROM ABOVE

LOCAL PRESIDENT:	
STATE/DIOCESE PRESIDENT:	
PASTOR:	
STATE BISHOP:	

HAS THE NOMINEE BEEN A MEMBER OF THE INTERNATIONAL WOMEN'S COUNCIL FOR AT LEAST 10 YEARS?_____

DESCRIBE THE LOCAL, STATE AND INTERNATIONAL WOMEN'S COUNCIL PROGRAMS, PROJECTS OR SERVICES THE NOMINEE IS ACTIVELY INVOLVED IN:

DESCRIBE THE SIGNIFICANT CONTRIBUTION TO THE WOMEN'S COUNCIL ON THE LOCAL, STATE OR INTERNATIONAL LEVEL: