

The Mother Jennie Dixon-Shelton Distinguished Service/Achievement Award

Application Form

Applications must be received by the CLJC National Women's Department in Philadelphia 6 weeks prior to the commencement of the National Women's Conference. The recipient(s) will be selected at least 3 weeks prior to the commencement of the conference. Multiple recommendations should be consolidated prior to submission.

(Please print or type)

Part I – Nominee's Personal Data

1. Nominees Name: _____
Last First Middle initial

2. Street Address: _____
City: _____ State: _____ Zip Code: _____

3. Telephone: Day () _____
Evening () _____
Cell phone () _____

4. Date of Birth: _____ Age: _____

5. Marital Status: _____

6. Number of children: _____ Ages: _____

7. Past or Present Occupation: _____

8. What local church does the nominee attend: _____
District: _____

9. How many years has the nominee been in the church: _____

10. What church activity/auxiliaries is the nominee active in: _____

Part II- Educational Status of the Nominee

1. Level of Education completed: Please check the applicable item.
 High School Graduate
 College Undergraduate
 Vocational School
 Technical School
 Other _____
 None

2. Is the nominee presently attending school?_____ If yes, what school is she attending: _____

3. Is the nominee currently seeking or holding a degree? _____

4. If yes, please check the applicable item:
 Associates Degree
 Bachelors Degree
 Masters Degree
 Doctorate Degree
 None

5. What is the date the nominee is expected to be conferred, or the date she graduated: _____

5. What is the nominee's future or former career goal, and how has her former degree helped her in her present career: _____

Part III -Nominator's Data: (Person Submitting Application):

Name: _____
Last First Middle Initial

Church Location and District _____

Daytime Phone number () _____

Nominator, Tell why you feel this candidate should be considered for the award. Remember, you will be introducing your nominee from this writing. The content and presentation will be very important. Please outline your nominee's specific service and/or achievements.

Signature Page

Local Women's Supervisor _____ Date _____

Local Brother - in - charge _____ Date _____
(When applicable)

District Women's Supervisor _____ Date _____

District Men's Supervisor _____ Date _____

National Youth Dept. President _____ Date _____
(When applicable)

National Officer _____ Date _____
(When applicable)