March 2014 Rev. 1 March 17, 2014

LAY SERVANT / SPEAKER RECORD

NAME:			
Address:			
City/State/Zip:			
Home Phone:	Wo	ork (cell) Phone:	
Email			
Local Church:		District:	
BASIC COURSE COMPLETED: (year))	_	
Approved as:			
Local Church Lay Servant: (year)			
Certified Lay Servant: (year)			
Lay Speaker: District Committee Intervie	w: (Date)		
Conference Committee Ap	proval: (Date) _		
ADVANCED COURSES / ALTERNA			D:
Title	Date	Annual Report filed	Approved / Recertified as
Follow-up Contacts:			