

Indiana Conference Lay Speaker Requirements for Recertification



Personal Information

Candidate's Name _____ Male Female
(As it will appear on certificate)

Ethnicity: African American Asian/Pacific Islander Caucasian/European
 Multi-Cultural/Global Native American Spanish/Hispanic/Latino

Address: _____

City _____ State _____ Zip _____

Primary Phone _____ Home Work Cell E-mail _____

District Central East North North Central Northeast
 Northwest South Southeast Southwest West

Name of Church _____

Church Address _____

City _____ State _____ Zip _____

Church Phone _____ Pastor Name _____

Lay Speaker Requirements

Initial Certification Date Issued _____

Required Lay Servant Ministries Advanced Course (must be completed within last three years)

Course Title _____

Completion Date _____

Interview with District Committee on Lay Servant Ministries Interview Date _____

Signatures

Candidate Signature _____ Date _____

District Director for Lay Servant Ministries Signature _____ Date _____

Indiana Conference Committee on Lay Servant Ministries Use Only

Date Received: _____

Date Reviewed: _____

Approved for Recertification as Lay Speaker by
Indiana Conference Committee for Lay Servant Ministries

Yes No

Comments:

Indiana Conference Director of Lay Servant Ministries Signature: _____

Certificate Issued Date _____



To be completed by District Director for Lay Servant Ministries
Submit Completed Form to: Conference Director of Lay Servant Ministries