

**The Eleventh Episcopal District
Lay Organization
African Methodist Episcopal Church
The Commission on Programs & Activities**



**THE
HALL OF FAME AWARD**

The Right Reverend O c t x k p ' E 0 \ c p f g t u , II
Presiding R t g r e w
'''Mt. L q j p ' Y 0 N q x g
Episcopal President

Eleventh Episcopal District Lay Organization HALL OF FAME AWARD APPLICATION



Please thoroughly complete and **type** the application using additional space if needed by adding extra sheets.

Part I - BIOGRAPHICAL INFORMATION

Name:			
Address:	City:	State:	Zip Code:
Phone:		Email:	
Church:	District of Annual Conference:	Conference:	
Active member of Lay over 10 year period: Yes <input type="checkbox"/> No <input type="checkbox"/> EEDLO Conventions attended: (List years) _____			
Episcopal Retreats/Learning Labs attended: (List year and location) _____			

Part II - ELIGIBILITY VERIFICATION

Please answer the following questions. (Each answer must be 'yes' in order to be eligible.)

Eligibility Requirement	YES	NO
Nominees must meet ALL Requirements listed	A YES response in each box is required to proceed	A NO response in any box, stops process
Been an active member of the Local, District of the Annual Conference, Conference and Episcopal levels of the Lay Organization over a ten (10) year period		
Attended a minimum of five (5) Episcopal Conventions over a ten (10) year period		
Attended a minimum of four (4) Episcopal Lay Organization Retreats/ Learning Labs over a ten (10) year period		
Provided leadership on at least two (2) levels of the Lay Organization over a ten (10) year period		

Part III - DOCUMENTATION OF SERVICE

Please document your **specific involvement** working and serving in the Lay Organization at **ALL** levels (Local, District of the Annual Conference, Annual Conference, and Episcopal District) to include leadership roles held and the number of years. Make sure to include information about your achievements, recognitions, awards and contributions, including dates. (UTILIZE ADDITIONAL SPACE IF NEEDED BY ATTACHING EXTRA SHEETS).

LOCAL - specific involvement, contributions, activities, leadership, programs, other, to include dates

DOCUMENTATION OF SERVICE

DISTRICT OF THE ANNUAL CONFERENCE - Specific involvement, contributions, activities, leadership, programs, other, to include dates

ANNUAL CONFERENCE - specific involvement, contributions, activities, leadership, programs, other, to include dates

EPISCOPAL DISTRICT - specific involvement, contributions, activities, leadership, programs, other, to include dates

Significant Honors, Recognitions, Awards at each level, to include dates

By my signature, I attest the information enclosed in this application is accurate and true. I understand that misrepresentation of the information may result in my application being disqualified.

Signature of Applicant

Signatures:

Local President

District of Annual Conference President

Conference President