LTCSW Pre-Convention LEADERSHIP CHALLENGE AWARD CERTIFICATION FORM

Participant:	LTCSW ID#:
Congregation:	Grade:
Church Coordinator:	
(To be completed by the event coo This participant qualifies for: GOLD	
I certify that I have met the criteria for receiving a for meeting the requirements for	
Participant Signature:	Date:
Adult Certifier Signature:	Date:
Describe Your Service In L Event(s) coached:	·
Grade(s) of participants being coached:	
Total hours coached:	
Are there any special circumstances that the Ev	vent Director should know?