

Girl's Name		Today's Date
Address		
City	State	Zip Code
Involved in Girls Ministries as a (Club-level)	at	(Church)
City	State_	Zip Code ————
Sponsor	Address	
City	State	Zip Code
Date of incident*	Place	

*Nomination form must be submitted to your district office within 3 months of the incident.

Coordinator or Sponsor

Please give a full account of the incident in the space below. Attach additional pages if needed. Give as many details of the incident as possible. Newspaper clippings, pictures, and other forms of endorsement will enhance this request. Ask the pastor and parent (or witness of the incident) to complete the endorsements on the reverse side of this form. Send the completed form and all information to your district Girls Ministries coordinator. She will forward it to the national Girls Ministries office for consideration.

(continued)

Endorsements

Pastor	Parent or Witness of Incident
Date —	Date
Comments	Comments
Comments	S Comments
The follow	ing information is to be completed by the district Girls Ministries coordinator.
After revi	ewing the nomination:
	_ I think this merits the Miriam Award on the basis of:
	Outstanding courage in time of crisis.
	The saving of a life.
	Spirtual fortitude and outstanding attitude under adverse circumstances such as loss of sight, loss of a member of the body, permanent disability, etc. Spiritual strength and maturity beyond her years during a family crisis and hardship.
	_ This request does not merit the award.
	_ A letter of commendation from the national Girls Ministries coordinator would be more appropriate than
	the award.
Comment	S

Signed _____

(district Girls Ministries coordinator)

Date _____