

RECOMMENDATIONS FOR APPOINTMENT OF ELDERS AND MINISTERIAL SERVANTS

(If submitting recommendations to be considered during a regular visit of the circuit overseer, the Congregation Service Committee should send this form to the circuit overseer at least one month before the visit.)

_____ (Congregation name) _____ (City) _____ (Province or state) _____ (Congregation number)

Visit beginning Tuesday, ____ / ____ / ____ (Month / Day / Year) _____ (Circuit number)

ELDERS

First Name	Middle Name	Last Name	Suffix (Jr., III, etc.)	Birth Date (Month/Day/Year)	Baptism Date (Month/Day/Year)	Anointed or "Other Sheep"	Requesting Appointment Between Visits*
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>

MINISTERIAL SERVANTS

First Name	Middle Name	Last Name	Suffix (Jr., III, etc.)	Birth Date (Month/Day/Year)	Baptism Date (Month/Day/Year)	Anointed or "Other Sheep"	Requesting Appointment Between Visits*
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>
				/ /	/ /		<input type="checkbox"/>

* If requesting an appointment between visits, include a letter of recommendation from the brother's previous Congregation Service Committee.

_____ (Coordinator of the body of elders)

_____ (Secretary)

_____ (Service overseer)

_____ (Date)