

Missouri District LYF Team Nomination Form

Nominee Information:

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ E-mail: _____
Congregation (must be a member of the LCMS): _____
School: _____

Are you currently a freshman? Yes _____ No _____
(If "no" please refer to the cover letter, paragraph 1)

Nominator's Information:

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ E-mail: _____
Relationship to nominee: _____ How long? _____

Nominator, please reply to the following in reference to the nominee: I believe this person would be an asset to the District LYF Team because...

Nominee's Signature: _____
Parent's Signature: _____
Pastor's Signature: _____
Congregation / City: _____

Nominee, please be sure to fill out the second page and then return both of these pages **and three letters of reference** to Sue Stiegemeyer by **April 1st, 2020**. Your letters of reference should include e-mail addresses and phone numbers so we can contact them, and your references may send them directly to Sue.

You can e-mail everything to: sstiegemeyer@stpauljackson.com

Or you can mail to Sue Stiegemeyer at: 223 West Adams, Jackson, MO 63755

