



Church Business Conference

ENDORSEMENT FORM FOR A DEACONESS

*Please send this to:*  
Church of God of Prophecy  
State Office  
P.O. Box 220  
Elizabethtown, KY 42702

Candidate's Name: \_\_\_\_\_

Church Name: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Date of Business Conference: \_\_\_\_\_

The pastor and the local church listed above have prayerfully considered and do hereby recognize the call of God upon the life of \_\_\_\_\_.

Having come to this understanding, in full agreement, the local church at \_\_\_\_\_ hereby recommends \_\_\_\_\_ for deaconess.

We fully acknowledge a partnership with the State Office to equip \_\_\_\_\_ for the ministry God has called her to fulfill.

Signed: \_\_\_\_\_  
*Pastor*

\_\_\_\_\_  
*Candidate for Deaconess*

\_\_\_\_\_  
*Church Clerk*

*(Please copy for the church files.)*