



Nomination Form

(Please Print Legibly)

First Name *(Primer Nombre)*

Last Name *(Apellido)*

Spouse's Name *(Nombre de la Esposa)*

Today's Date *(Fecha)*

Address *(Direccion)*

City *(Ciudad)*

Zip

E-mail

Phone Number *(Telefono)*

Marital Status *(Estado Civil)*

Place of Employment *(Empleo)*

Single (Solo)

Married (Casado)

Divorced (Divorciado)

Separated (Apartado)

Widow/Widower (Vdo)

Names of family member(s) who live in the home & their relationship to the recipient
(Nombres de miembros de la familia que viven en el hogar y su relacion con el receptor)

Has this person been nominated before? *(Ha sido esta persona nominada antes?)*

Yes

No

Does this person attend church? *(Esta persona asiste a la iglesia?)*

Yes

No

What is the recipient's immediate financial need? Please include exact amounts, to whom the funds are owed, and any other information that would benefit the team in making its decision. *(Cuál es la necesidad financiera inmediata del destinatario? Incluya las cantidades exactas, a quién se le deben los fondos y cualquier otra información que beneficie al equipo al tomar su decisión.)*

Please describe the recipient's overall life situation as specifically as possible. *(Por favor describa la situación general de la vida del receptor lo más específicamente posible.)*

How would this gift make a lasting change in the life of the recipient? *(Cómo haría este regalo un cambio duradero en la vida del destinatario?)*

Your First Name *(Tu Primer Nombre)*

Your Last Name *(Tu Apellido)*

Your Phone Number *(Tu Telefono)*

Your relationship with the Recipient
(Su relacion con el destinatario)

Do You Attend First Christian Church of Dodge City? *(Asistiras a First Christian Church?)*

Yes

No

Mail to First Christian Church, Attn: +One, PO Box 1416, Dodge City, KS 67801