

Committee Interest Application

| Name of Committee on Which You Wish to Serve | | | | |
|--|--------------|--------------------------------------|--------------------------|--|
| Name Printed | | Member Since | Today's Date | |
| Email Address | 1 | | | |
| Cell Number | | Home Number (if Different from Cell) | | |
| Current CoH Ministries in which you serve | | | | |
| List any skills or expertise that you can contribute to this committee | | | | |
| List any certifications or licenses that you have that will benefit this committee | | | | |
| | | | | |
| Decides Attended | For Office | | on File Deculor Civing | |
| Regular Attender | Member Since | Pledge | on File Regular Giving | |
| ☐ Yes ☐ No | | ☐ Yes | □ No □ Yes □ No | |
| Active in CoH Ministries | | | | |
| Meets Criteria for Serving on Con ☐ Yes | nmittee | | | |
| ☐ No – If no, explain: | | | | |