

Nomination Form

Information about Nominee

Nominee: _____

Address: _____

Phone Number: _____

Check the Nomination Category that applies:

- Marshall Fellow
- Nelson Fellow
- NextGen Fellow

Please share information and qualities about the nominee(s) that make them an encouraging model of Christian Stewardship:

Information about Nominator on page 2

Information about Nominator

Your Name: _____

Address: _____

Phone Number: _____ E-mail Address: _____

This form may be duplicated. There is no limit to number of nominations one person can submit.
All nominations are due August 1. Thank you for submitting a nomination.

Return complete nomination form to:

Fellowship of Christian Stewards
Missouri Baptist Foundation
400 East High Street, Suite 500
PO Box 1113
Jefferson City, MO 65102-1113

You may also submit a nomination online at: www.mbfm.org/nominate