

Living Hope Award Nomination Form

Filled with Living Hope in Christ, Confessing, Praising, and Advancing His Kingdom.

For nominations for the Living Hope Award, please complete and submit the following form in its entirety. Submissions must be received no later than May 25 to be considered. Nominations may be submitted by email to sue.green@nidlcms.org or mailed to:

LCMS Northern Illinois District Attn: Sue Green 2301 S Wolf Rd Hillside, IL 60162

For more information, please visit nidlcms.org/LivingHope or call 708-223-3116.

Nominee Information			Your Information		
Name			Name		
Address			Address		
City	State	Zip	City	State	Zip
Telephone			Telephone		
Email			Email		
Congregation			Congregation		

Nomination for (check one):

- □ Lay Leader
- □ Rostered Church Worker
- □ New Ministry or Program
- □ Innovation in our Lutheran Schools
- ☐ Youth Ministry Leadership Development



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Award Qualifications – The Living Hope Award recipient demonstrates commitment to the mission of the Northern Illinois District: *Filled with living hope in Christ, Confessing, Praising, and Advancing His Kingdom.* Their work should fall under one or more of the District's mission pillars:

- **WORD:** Helping others to be more centered on a rich life of Word and Sacrament.
- **WELLNESS:** Promoting and encouraging health and vitality in congregations, schools, ministries, professional workers, and lay-leaders.
- **WITNESS:** Encouraging personal witnessing, congregational engagement with their community, support of our NID partnerships and missions, or sharing in a world mission.

Statement and Reason for Nomination – Describe the nominee and their work as it relates to the three mission pillars of **Word**, **Wellness**, and/or **Witness**. (Please attach additional paper if more space is needed.)

Reference for the Nomination – Please provide a contact that can contribute additional insights about the nominee.

Name Telephone E-mail