



Application for Girls Only Graduate Certificate

Please allow three weeks for processing prior to awards ceremony

Office Use Only
Girls Only Grad #

PLEASE PRINT OR TYPE

SECTION _____ Coordinator _____

Girl's Name _____ Birth Date _____ Grade _____

Church Name _____ Sponsor's Name _____

Church Address _____ Sponsor's Address _____

Sponsor's E-mail _____ **Please print legible!**

_____ **Mail to church**

_____ **Mail to sponsor**

Date Review Passed ____ / ____ / ____ Score _____

Review Board Member Signature _____

Review Board Member Signature _____

Review Board Member Signature _____

I have completed my Journal Pages

I have read the entire Bible while I was a Girls Only club member

NOTE: Credit for reading the New Testament during Stars or the Bible during Friends does not count for Girls Only Graduates.

Girl's Signature _____

Sponsor's Signature _____

Date ____ / ____ / ____

Date of local Girls Ministries Celebration or Awards Ceremony ____ / ____ / ____

DATE TO BE PRINTED ON CERTIFICATE ____ / ____ / ____

Pastor's Signature _____ Date ____ / ____ / ____

Mail this form to: [Alpha Scarbroough DGMD, 102 Monaco Circle, Clemson, SC 29631](mailto:AlphaScarbrooughDGMD@Clemson.edu)
[864-654-4585 / 864-650-1679](tel:864-654-4585)

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Charter Date ____ / ____ / ____ Application received ____ / ____ / ____ Certificate sent ____ / ____ / ____