

# Church Women United, Inc.



## CERTIFICATE OF APPRECIATION AWARD

### Award Description and Ordering Procedures

Recognition of “Certificate of Appreciation” award recipients at all levels (local, state, regional, and national) is encouraged.

***Local Unit, State Unit, Regional, National: \$10***

***Award Includes: Certificate of Appreciation Award Certificate***

The Certificate of Appreciation Award acknowledges women and others for accomplishments as deemed appropriate by the local unit, state unit, regional unit, or by national officers and/or leaders.

Requirements: Biographical/background information and fee payment are required for each honoree. Units should send the required information and include a check in the amount of \$10, made payable to Church Women United, Inc., at least one month prior to the date needed to:

### CERTIFICATE OF APPRECIATION AWARD

Church Women United, Inc.  
475 Riverside Dr., Suite 1374  
New York, NY 10115

Retain a copy of all submitted information for your records. Copies of this information should also be sent to the state secretary and retained for the unit’s records. The “Certificate of Appreciation” award certificate will be sent to the unit upon receipt of the required fee and necessary information.

**For more information, contact:**

**CWU National Office • [info.churchwomenunitedinc@gmail.com](mailto:info.churchwomenunitedinc@gmail.com) • (212) 870-1030**

**Church Women United, Inc.**



**CERTIFICATE OF APPRECIATION AWARD**

**Biographical and Background Information**

***PLEASE TYPE OR PRINT CLEARLY. This information is for CWU records only.  
The honoree will not be notified by the CWU National Office.***

**Name of Honoree**

\_\_\_\_\_ (name as it should appear on the award certificate)

**Honoree's Address & Contact Information**

P.O. Box: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

**CWU Unit Information**

CWU Unit presenting award: \_\_\_\_\_ Local \_\_\_\_\_ State \_\_\_\_\_ Regional \_\_\_\_\_ National  
(check one)

Name of CWU Unit: \_\_\_\_\_

Date of Presentation: \_\_\_\_\_

Person Submitting Form: \_\_\_\_\_

P.O. Box: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

**INSTRUCTIONS**

*(1) Complete this form. (2) Please attach a brief biographical description of the honoree. Include background information about the honoree's CWU involvement, family, faith community activities, community activities, and educational background. Include a statement about why you have recommended this individual to receive the Certificate of Appreciation Award. Use extra paper if needed. (3) Enclose a check in the amount of \$10 made payable to Church Women United, Inc. (4) Mail one copy of all required information and payment to: CERTIFICATE OF APPRECIATION AWARD, Church Women United, Inc., 475 Riverside Dr., Suite 1374, New York, NY 10115.*