**REQUEST FOR PERMISION TO CHANGE CHURCH NAME**

North Central Ohio District Church of the Nazarene Advisory Board

Church: Click or tap here to enter text. Date: Click or tap here to enter text.

This request is made in compliance with Manual 101.1.

1. The Click or tap here to enter text. Church of the Nazarene requests permission from the North Central Ohio District Church of the Nazarene Advisory Board to change the name of the local church.
2. We request to change the name:

From Click or tap here to enter text. Church of the Nazarene

To Click or tap here to enter text. Church of the Nazarene.

1. Reason(s) for Name Change: Click or tap here to enter text.
2. Please record the action of the local church board to approve this proposal pending district approval:

Date of the vote: Click or tap here to enter text.

Total number of Board Members:Click or tap here to enter text.

Total Board Members Present: Click or tap here to enter text.

Total ballots cast:Click or tap here to enter text.

Number of “Yes” votes: Click or tap here to enter text.

Number of “No” votes: Click or tap here to enter text.

**At this point, return this form to the District Superintendent for the approval of the Advisory Board.**

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1. Subject to the vote of the local church membership, approval is hereby given to the Click or tap here to enter text. Church of the Nazarene to change the name of the church as stated above.

Date: Click or tap here to enter text.

Typed Signature: Secretary, NCO District Advisory Board: Click or tap here to enter text.

**At this point, return this form to the Pastor for the church vote.**

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1. Please record the vote of the church membership on this proposal in the space below:

a. Date of the vote Click or tap here to enter text. .

b. Total number of Church Members Click or tap here to enter text.

c. Total Church Members Present Click or tap here to enter text.

d. Total ballots cast Click or tap here to enter text.

e. Number of “Yes” votes Click or tap here to enter text.

f. Number of “No” votes Click or tap here to enter text.

**At this point, please return this form to the District Superintendent for approval.**

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1. Final approval to change the name of the church is hereby granted.

Date: Click or tap here to enter text.

Typed Signature: District Superintendent, NCO District Advisory Board: Click or tap here to enter text.

**At this point, return this form to the Pastor. A copy of this form will be filed at the district office to file.**

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