**THERE IS HOPE IN JESUS CHRIST MINISTRY, MANCHESTER, NJ, USA**

**Pastor: Rev. Tracie Plungis, OM, CSW Website: ThereIsHopeInJesusChrist.org**

**E-Mail Address:** **ThereIsHopeInJesusChristMinistry@yahoo.com**

**NOTARIZED ATTESTATION FORM FOR BIBLICAL STUDIES CERTIFICATES**

**IMPORTANT NOTE:** PLEASE REMEMBER TO COMPLETE **WITH THE NOTARY PRESENT.** THEY ARE TO WITTNESS YOUR LEGAL NAME ID, DATE AND SIGNING OF DOCUMENTS.

**Upon completion:** 1) Email completed, notarized form (You may scan into email, e-fax or photo email.) The document, signatures and notary must be legible and clear in the email in order to be approved. 2) Please be sure to notify ministry on the Sign Up form that you have emailed your completed Notarized Attestation Form.

**Sign Up #1:** **CERTIFICATE IN BIBLICAL STUDIES AND COURSE COMPLETION CERTIFICATES:** SECTIONS A, B, C & D.

**Sign Up #2: INDIVIDUAL BIBLICAL COURSE COMPLETION CERTIFICATES BY EMAIL ONLY:** SECTIONS A, C & D

**SECTION A: LEGAL NAME ATTESTATION & AGE 18 OR OLDER ATTESTATION (IF UNDER 18, SEE SECTION D)**

I ATTEST YES THAT MY LEGAL NAME IS AS FOLLOWS:

PRINT LEGAL FIRST NAME: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PRINT LEGAL LAST NAME: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I ATTEST YES THAT MY LEGAL BIRTH RECORD AGE AS OF TODAY’S DATE IS AGE 18 OR OLDER: **\_\_\_\_\_\_\_ Initials**

**SECTION B: MAILING ADDRESS ATTESTATION**

I ATTEST THAT MY MAILING ADDRESS FOR THE PURPOSES OF MAILING THE COMPLETED: THERE IS HOPE IN JESUS CHRIST MINISTRY CERTIFICATE IN BIBLICAL STUDIES IS AS FOLLOWS:

PRINT FIRST AND LAST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT ADDRESS LINE 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT ADDRESS LINE 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION C: HONESTY AGREEMENT**

**By completing the signature section D, I agree: that the information I am providing to There Is Hope In Jesus Christ Ministry is accountable and accurate. I will do my own work and submission of work unless otherwise arranged with There Is Hope In Jesus Christ Ministry. Although I may do a group study with others, I will not copy another person’s work, in whole or in part, and turn it in as my own. I will not receive unfair assistance from another person or any other unauthorized source on an assignment that was meant to be completed alone. I will not plagiarize and I will not claim credit for work that is not the product of my own honest effort.**

**SECTION D: DATE, SIGNATURE(S)**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF PARTICPANT: x\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

REQUIRED: IF PARTICIPANT IS UNDER THE AGE OF 18, A PARENT/GUARDIAN MUST ALSO SIGN. THE **PARENT/GUARDIAN’S SIGNATURE** **ATTESTS YES** AND GIVES PERMISSION FOR THE MINOR PARTICIPANT TO COMPLETE THE REGISTRATION AND APPLICABLE STUDIES.

RELATIONSHIP TO PARTICIPANT (Parent, Grandparent, Foster, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT LEGAL FIRST & LAST NAME OF ADULT PARENT/ GUARDIAN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF PARENT / GUARDIAN OF MINOR LISTED ABOVE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_