



# New Jersey Conference of Seventh-day Adventists, Inc.

(A Non-profit Religious Corporation) 2303 Brunswick Avenue, Lawrenceville, New Jersey 08648  
Phone: 609-802-0855 Fax 609-802-0868

## SERVICE REQUEST FOR VISITING WORKER

Name of Requested Person \_\_\_\_\_

Email of Requested Person\* \_\_\_\_\_

From what Conference\* \_\_\_\_\_

a. Name of Executive Secretary\* \_\_\_\_\_

b. Email Address\* \_\_\_\_\_

c. Fax # \_\_\_\_\_

From what Union (if not NAD) \_\_\_\_\_

From what Division (if not NAD) \_\_\_\_\_

Date(s) Requested \_\_\_\_\_

Purpose \_\_\_\_\_

Requesting Church/Conference Department \_\_\_\_\_

Requesting Pastor/Departmental \_\_\_\_\_

Responsibility for Expenses \_\_\_\_\_

Approved by New Jersey Conference \_\_\_\_\_

Date \_\_\_\_\_

\*Required information

### ORGANIZATION RECEIVING THIS REQUEST

PLEASE, CHECK ONE BOX:  APPROVED  DENIED

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

▶ PLEASE ADVISE OF THE APPROVAL/DENIAL OF THIS REQUEST BY FAXING A COPY  
TO (609) 802-0868.

*Thank you.*