

# FORM 21—Regional Coordinator’s Monthly Report

As authorized by the Division of Christian Education Accreditation and Credentials  
of the Sunday School Publishing Board, National Baptist Convention, USA, Inc.

**Submit form to:** The Division of Christian Education, 330 Charlotte Avenue, Nashville, Tennessee 37201-1188

Region: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone #: Daytime (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Have you contacted your State Directors concerning activities in their state that can be submitted to the DCEAC for possible news/information used in the *Informer*? \_\_\_\_ Yes \_\_\_\_ No

How was this information disseminated? \_\_\_\_\_

## PART 1

1. Inquiries received from State Directors—please present documentation.
2. List Christian Leadership Schools assisted by you. Provide dates and primary assistance.

## PART 2

1. List special Christian education leadership training available in your region:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List the weaknesses of Christian education leadership training in your region:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Identify additional training that you would like to have offered in your region:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_  
Regional Coordinator

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signed: \_\_\_\_\_  
DCEAC

Date \_\_\_\_/\_\_\_\_/\_\_\_\_