



ASSEMBLIES *of* GOD
THEOLOGICAL
SEMINARY

Emergency Services

CHAPLAINCY MINISTRIES

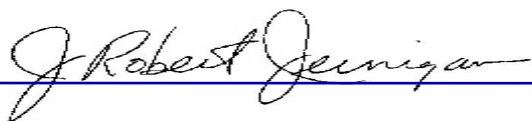
This certificate is hereby granted to:

Name of Student

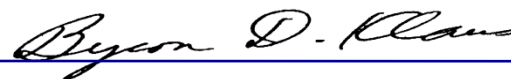
for completing _____ hours of continuing education training in

Name of Course

Completed on this _____ day of _____, 20____



Robby Jernigan, Program Coordinator



Dr. Byron D. Klaus AGTS President