NOMINATIONS FORM

Please "X" below all positions of interest. (Number) = Number Needed

Synod Council - 3 Yr./Youth 2 Yr. Term: Lay Female (1) Lay Male (1) Clergy – Male or Female (1) Youth (1) Consultation – 6 Yr. Term: Lay Female (1) Mission Endowment Fund Committee: 3 Yr. Term (2) Clergy/Lay – Male or Female 2 Yr. Term (2) Clergy/Lay – Male or Female 1 Yr. Term (1) Clergy/Lay – Male or Female				<u>Discipline – 6 Yr. Term:</u> Lay Female (1)				PLEASE SUBMIT A DIGITAL PHOTO HERE		
Last Name:				First N	ame:		1		Middle Int.:	
Street Address:					Citv/S	State/Zip:				
Telephone:					Emai	regation				
Congregation:					City/T	•				
Current					Previ	ous				
Occupation:					Occu	pation:				
Year of Birth:		Education:								
Church Service Po	osition / Years o		e print le	egibly or	type if	not comple	eted onli	ne. List no m	ore than 5):	
Significant Community Service (Please print legibly or type if not completed online. List no more than 3):										
In 100 words or less, describe your unique talents that you could contribute to the position(s) of interest above. (Please print legibly or type if not completed online.)										
Are you willing and able to fulfill the duties of this position?Yes, with the help of God										

The Nominations form must be completed by <u>May 15</u> to have biographical information included in the Assembly Nomination Packet. If received after May 15 (up until 9 AM Friday, June 14, 2019), the nominees name will only appear on the ballot unless the nominee provides 300 copies of their Nominations Form for distribution to the Assembly.

Please send the completed form with picture to the Allegheny Synod, ELCA, Attention: Pr. Drew McCaffery, Nominations Chair, 701 Quail Avenue., Altoona, PA 16602 or email to blcpastor@atlanticbbn.net with Attention: Pr. Drew McCaffery, Nominations Chair in the Subject Line.

The Nominations form is available on the Synod's website (alleghenysynod.org) under Resources / Synod Assembly.