



Women of the ELCA
Eleventh Triennial Convention
July 14-16, 2020
Phoenix, AZ

TRIENNIAL CONVENTION VOTING MEMBER NOMINATION FORM

(This form may be duplicated as needed)

INFORMATION ABOUT NOMINEE:

Last Name _____ First Name _____ MI _____

Address _____

Daytime telephone (____) _____ Evening telephone (____) _____

Email Address _____

Congregation/City _____ Cluster _____

Address of Congregation _____

Age Category: _____ 13-19 _____ 20-35 _____ 36-55 _____ over 55

Ethnic/Racial heritage: ___ Asian/Pacific Islander ___ Hispanic ___ African American ___ Black
___ Arab/Middle Eastern ___ American Indian/Alaska Native ___ Caucasian ___ Other

First-Time Delegate?: ___ Yes ___ No

List Involvement or Activities in:

- **Women of the ELCA** [include congregational or inter-congregational unit, cluster/conference, synodical women's organization, and churchwide experience].

(continued on next page)

- **ELCA** [include congregation, cluster/conference, synod, regional, and churchwide experience]

- **Ecumenical** [include local, state, national/international organizations]

- **Community participation** [indicate offices, volunteer services, other responsibilities for local, state, and national/international organizations]

- **Vocational/occupational experience**[full or part-time]

OTHER COMMENTS:

Submitted by:

NAME _____ SIGNATURE _____

Address _____ Telephone (____) _____

Suggested nominee has agreed to accept nomination.

Please complete both sides of this form and submit. In order for your suggested nominee to be considered by the nominating committee, nomination forms must be ***received*** by **September 21, 2019, *BEFORE*** THE CONVENTION STARTS.** Please mail completed forms to: **Charlene Rollins, 244 Brook Avenue, North Plainfield, NJ 07060 or njwelca@yahoo.com.** For questions or more info, call **908-698-1454.**

****NOTE: TRIENNIAL VOTING MEMBER FLOOR NOMINATIONS CAN NOT BE ACCEPTED.**