

32nd Annual New Jersey Women of the ELCA Convention

Saturday, September 21, 2019

Holy Trinity Lutheran Church
508 Green Pond Road
Rockaway, NJ 07866

“Love is patient, love is kind. Love is not jealous or boastful”

1 Corinthians 13:4

NOMINATION FORM FOR THE 2019 CONVENTION

SUGGESTED NOMINEE FOR: (please check one)

- Board Member President 2-Year Term
- Board Member Vice President 2-Year Term
- Board Member 2-Year Term
- Board Member 2-Year Term
- Board Member 2-Year Term
- Board Member 2-Year Term
- Board Member 2-Year Term
- Board Member 2-Year Term
- Board Member 2-Year Term
- Youth Board Member 1-Year Term

(This form may be duplicated as needed)

INFORMATION ABOUT NOMINEE:

Last Name _____ First Name _____ MI _____

Address _____

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

Congregation/City _____ Cluster _____

Address of Congregation _____

Please list the qualifications, such as formal training and other acquired abilities that would help this person perform the duties for the position checked above.

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]

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

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

Other comments: Why do you think this person would be effective in this position?

Submitted by:

NAME _____ SIGNATURE _____

Address _____ Telephone (____) _____

Suggested nominee has agreed to accept nomination.

Please complete both sides of this form and submit by **Sept 16, 2019** in order for your suggested nominee to be considered by the nominating committee.

Mail completed form to: **Jean Wilkinson-Heard, 1701 Clinton Street, Linden NJ 07036.**

PLEASE NOTE THAT FLOOR NOMINATIONS WILL BE ACCEPTED.