

New Jersey Women of the ELCA
28th Annual Convention
Saturday, September 26, 2015

St. Paul Lutheran Church
130 Cable Avenue, Beachwood, NJ 08722

“Living Wholly for God”

(based on the Bible verse Duet. 6:5)

NOMINATION FORM FOR THE 2015 CONVENTION

SUGGESTED NOMINEE FOR: (please check one)

| | | |
|--------------------------|---------------------------|--------------------|
| <input type="checkbox"/> | President | 2-Year Term |
| <input type="checkbox"/> | Treasurer | 2-Year Term |
| <input type="checkbox"/> | Board Member | 2-Year Term |
| <input type="checkbox"/> | 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].

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

(continued on next page)

NOMINATION FORM FOR THE 2015 CONVENTION (continued)

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 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 **August 1, 2015** in order for your suggested nominee to be considered by the nominating committee. Mail completed form to: **Charlene Rollins, 244 Brook Avenue, North Plainfield, NJ 07060.**

PLEASE NOTE THAT FLOOR NOMINATIONS WILL BE ACCEPTED.