



CONSIDERATION FOR NOMINATION FORM

CENTRAL STATES SYNODICAL ORGANIZATION

WOMEN OF THE ELCA

Check the position for which the nominee is willing to serve. Individuals nominated must consent to serve if elected. Each position is for a two-year term.

Positions for which nominations are needed for 2023 are:

_____ President _____ Treasurer

_____ Board Member _____ Board Member _____ Board Member

Name _____

Address _____

City _____ State _____ Zip _____

Phone (cell) _____ (home/work) _____

Email Address _____

Name of Congregation _____ City _____

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(Continued)

Please list experience (beginning with the most recent, list significant experience in each area over the most recent ten years). Add additional sheets if needed.

Occupational History

Leadership/Participation in congregation women's programs/activities

Leadership/Participation in congregation

Leadership/Participation in Central States Synod or ELCA programs/activities

Other organization affiliations (community, state, national)

Reasons for believing nominee can serve effectively in position, if elected:

_____ (signature is required to be a valid nomination)
Signature of President/Coordinator/Leader of nominee's congregational unit (NOTE: if no active congregational unit, signature of pastor)

Complete both pages of this form and return by May 1, 2023 to the Nomination Committee:
Rhonda Templing, 234 NW 210 Road, Hoisington, KS 67544 rtemp@russellks.net
If you have questions contact Rhonda at the e-mail address above.