

**SOUTHEASTERN SYNOD WOMEN OF THE ELCA
2017 BOARD NOMINATION FORM**

Check the position below in which the nominee is willing to serve. The individual nominated must consent to serve if elected. All board positions are for a two-year term.

_____ **Vice President**

_____ **Secretary**

_____ **Board Member**

Name _____

Address _____

City _____ **State** _____ **Zip Code** _____

Telephone home () _____ **cell/other ()** _____

email _____

Please list any positions held and most significant experience or service in each area over the last five years. (For example, president of your congregational unit, volunteer at homeless shelter, etc.)

Congregational Level _____

Cluster Level _____

Synodical Level _____

Churchwide Level _____

Community Service _____

Occupation _____

Age Range (*Optional)

_____35 years or under

_____50-64

_____36-49

_____65 or over

Ethnic/Racial Heritage (*Optional)

_____Hispanic

_____Caucasian

_____Native American

_____African American

_____Asian American

Primary language if other than English (*Optional) _____

Name and number of cluster _____

Name and address of congregation _____

In your own words, explain why you have allowed your name to be placed in nomination for this position.

*Information from these categories insures that we are in line with churchwide policies concerning inclusivity and in no way is intended to offend.

Please send this completed form along with a photo of the nominee to
Tommie Morgan, 1201 Westbury Drive, Mobile, AL 36609 or tommie456@bellsouth.net and
Louise Iconis at 2830 Sylvan Ramble Road, Atlanta, GA 30345 or louise@iconis.com



(This section is to be completed by the participant nominating this person)

Name _____

Address _____

Telephone (____) _____ email _____

Name and address of congregation _____

Signature _____