

# 2019 NOMINEE APPLICATION FORM

(Please include a photo of the nominee)

Nominee For: \_\_\_\_\_

Name: \_\_\_\_\_  
(first) (middle) (last)

Address: \_\_\_\_\_  
(street) (city) (state) (zip code)

E-mail Address: \_\_\_\_\_ Occupation (current or past): \_\_\_\_\_

Phone (please indicate cell or home): \_\_\_\_\_

Congregation: \_\_\_\_\_  
(congregation name) (congregation city)

ELCA Member (check one):  Yes  No Pastor's Signature: \_\_\_\_\_  
(for lay nominees only)

Conference (check one):  Akron-Wooster  Canton-Massillon  Cleveland East  Cleveland West  
 Eastern  Richland-Ashland  Southern

Demographic Information (check all that apply):  Male  Female  Clergy  Deacon  Lay  
 Person of Color  LGBTQ  Primary Language not English

Age:  70+  60+  50+  40+  30+  Young Adult (18-29): \_\_\_\_\_  Youth (13-17): \_\_\_\_\_  
(Date of Birth) (Date of Birth)

List no more than three areas of synod service. Indicate **current** service by checking the box.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

List no more than three areas of congregational service. Indicate **current** service by checking the box.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

List no more than three areas of community service. Indicate **current** service by checking the box.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Complete the sentence; My main interest in the church is ...

\_\_\_\_\_

Email digital photo to [kkaufman@neos-elca.org](mailto:kkaufman@neos-elca.org)

Has the nominee been contacted and consented to be nominated?  Yes  No

Referred by or Submitted by (Self-nominations must have a referral): \_\_\_\_\_

Phone (primary): \_\_\_\_\_ (work): \_\_\_\_\_

Address: \_\_\_\_\_

Congregation (name): \_\_\_\_\_ (city): \_\_\_\_\_