

NOMINATIONS FORM

Please "X" below all positions of interest. (Number) = Number Elected for that position

<p><u>Synod Council - 3 Yr. Term</u> <input type="checkbox"/> Lay Female (1) <input type="checkbox"/> Lay Male (1) <input type="checkbox"/> Clergy – Male or Female (3)</p> <p><u>Synod Council-2 Yr. Term</u> <input type="checkbox"/> Clergy – Male or Female (1)* <input type="checkbox"/> Youth-Age 15-18 (1)</p> <p><u>Synod Council-1 Yr. Term</u> <input type="checkbox"/> Clergy – Male or Female (1)*</p> <p><u>Consultation – 6 Yr. Term:</u> <input type="checkbox"/> Clergy Male (1)</p> <p><u>Consultation – 4 Yr. Term:</u> <input type="checkbox"/> Clergy Female (1)*</p>	<p><u>Discipline – 6 Yr. Term:</u> <input type="checkbox"/> Lay Female (1) <input type="checkbox"/> Lay Male (1)</p> <p><u>Discipline – 4 Yr. Term:</u> <input type="checkbox"/> Clergy Female (1)*</p> <p><u>Mission Endowment Fund Committee:</u> <input type="checkbox"/> 3 Yr. Term (2) Clergy/Lay – Male or Female <input type="checkbox"/> 2 Yr. Term (1) Clergy/Lay – Male or Female <input type="checkbox"/> 1 Yr. Term (1) Clergy/Lay – Male or Female</p> <p style="text-align: center;"><i>*Terms have been adjusted due to no synod assembly taking place in 2020 and/or due to individuals stepping down from elected positions.</i></p>	INSERT DIGITAL PHOTO HERE
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Last Name:		First Name:		Middle Int.:	
Street Address:			City/State/Zip:		
Telephone:			Email:		
Congregation:			Congregation City/Town:		
Current Occupation:			Previous Occupation:		
Year of Birth:		Education:			
Church Service Position / Years of Service <i>(Please print legibly or type if not completed online. List no more than 5):</i>					
Significant Community Service <i>(Please print legibly or type if not completed online. List no more than 3):</i>					
In 100 words or less, describe your unique talents that you could contribute to the position(s) of interest above. <i>(Please print legibly or type if not completed online.)</i>					
Are you willing and able to fulfill the duties of this position? <input type="checkbox"/> Yes, with the help of God					

The Nominations form must be completed by **May 9th, 2022** to be included in the Assembly packet. Any received after that date (up until 9 AM Friday, May 9th, 2022) will be uploaded digitally at the Assembly.

Please send completed form with picture to the Allegheny Synod, ELCA, Attention: Pr. Drew McCaffery, Nominations Chair, 701 Quail Avenue., Altoona, PA 126602 or email to via email to pastordrew0604@gmail.com with Attention: Pr. Drew McCaffery, Nominations Chair.