



God's work. Our hands.

## FLORIDA-BAHAMAS SYNOD NOMINATION FORM

**PLEASE PRINT**

Position Nominated For: \_\_\_\_\_

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/ZIP: \_\_\_\_\_

Congregation Name/City: \_\_\_\_\_ Conference: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Male  Female Birth Year: \_\_\_\_\_

Category:  Lay  Clergy  Youth (under 18)  Young Adult (18-35)  PCLE (Person of color or language other than English)

Primary Language: \_\_\_\_\_ Occupation: \_\_\_\_\_

Occupation & education experience (< 50 words):

---

---

---

---

---

---

---

Church leadership, participation (< 50 words):

---

---

---

---

---

---

---

List specific gifts or talents you would bring to the position (< 50 words):

---

---

---

---

---

---

---

Person making nomination: \_\_\_\_\_

Email: \_\_\_\_\_