

Biographical Information Sheet

Position nominated for : _____

Please fill out form and send back to the Synod Office .

Name: _____ Occupation: _____

Address: _____ Phone (home): _____ FAX: _____

Phone (work): _____ E-mail: _____

City / State / Zip Code: _____

Home Congregation / Community: _____

Education: _____

Person of Color?* YES NO Primary language (if not English)

* African-American, Asian, Arab or Middle Eastern, Hispanic, American Indiana, or Alaska Native.

Clergy Deacon Laity

Positions held (maximum four, each category). Positions currently held are indicated in **bold**.

Congregation: _____

Region / Churchwide: _____

Community: _____

Please tell in 25 words or less why you are interested in serving in this office / position.

Signature: _____

Nominated by: _____