

## STUDY COMMITTEE NOMINATION FORM

Name of Study Committee: \_\_\_\_\_

Nominee Name: \_\_\_\_\_ Age: \_\_\_\_\_

City, State: \_\_\_\_\_

District: \_\_\_\_\_ Congregation: \_\_\_\_\_

Occupation (general): \_\_\_\_\_ Gender: \_\_\_\_\_

Racial/Ethnicity Background (optional, but desired to satisfy the Call to Accountability guidelines.):

Caucasian \_\_\_ African American \_\_\_ Hispanic \_\_\_ Asian \_\_\_ Other: \_\_\_\_\_

**Leadership roles in the congregation, district, denomination, and beyond the church that have prepared this person to address the task of this study committee are:**

**The gifts and skills this person would bring to this study committee are:**

**Name and cell phone of the person who is submitting this nomination:**

\_\_\_\_\_  
\_\_\_\_\_

**If the person being nominated is present at Annual Conference, have him/her sign here:**

**Signature of person being nominated:** \_\_\_\_\_

**If the nominee is not at Conference to sign this form, the nominator must have the nominee send an email** to [annualconference@brethren.org](mailto:annualconference@brethren.org) stating that s/he is willing to serve if elected.

The Annual Conference Office may be able to help obtain the nominee's contact information.

In either case, please provide:

\_\_\_\_\_  
cell phone of person being nominated

\_\_\_\_\_  
email address of person being nominated