



Please type or print

The following person is nominated for the position of _____
(President, Vice President of Human Care, Vice President of Servant Resources, Treasurer or
Nominating Committee)

(See Bylaws, Article VI, Sections 1, 5, 6, and 8, and Article VII in the *LWML Handbook*; also Section G, Procedures
Manual for Officers and Committees in the *LWML Leaders Manual*.)

Name: _____
Address: Last _____ First _____ Middle Name/Initial _____
Street _____
City _____ State _____ Zip _____
Telephone: _____ Email: _____
Area Code/Number _____
Member of: _____ Church. City, State: _____
Pastor's Name: _____
Address: _____
LWML District: _____

**Please note that the completed form must be received by Dianne Diekmann by
August 15, 2010**

Nominated by _____
Address: _____
Phone No: _____ Email: _____

Note: Pages 2-4 need only be completed once if being nominated by more than one person.

Biographical Information

1. Educational background (High school, college and post grad):

School	Diploma or Degree	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Present occupation: _____

3. Past and/or present LWML experience - include dates of service in sequence beginning with the most recent date.

Committee or Office	Date
- National	
- District	
- Zone	
- Society	

INFORMATION FORM
Elected Officers & Nominating Committee Nominees

4. Employment: List in sequence beginning with the most recent date.

Description - Name of Firm

Date

5. Church related activities - List in sequence beginning with the most recent date.

Activity or Office or Committee

Date

6. Community Service - List in sequence beginning with the most recent date.

Description

Date

7. Additional information not included in above.

8. What spiritual gift/gifts has the Holy Spirit granted to you and how will they assist you in carrying out the mission of the LWML and this position if you are elected?

9. What is your vision for the Lutheran Women's Missionary League? Please write a vision statement that will be printed in the convention manual if you are a candidate for office.

10. Would you be willing to serve in any other office or on any LWML committee? Be specific.

I consent to serve if elected _____ <p style="text-align: center;">Signature of Nominee</p>

Enclose a recent black and white or colored photo (3X5 or 4X6) with this form, please.

PLEASE MAIL COMPLETED FORM AND PICTURE TO NOMINEE'S DISTRICT PRESIDENT FOR HER SIGNATURE		
_____ Signature of LWML District President	_____ District	_____ Date

Nominee signs the form and sends it with the required photo to the LWML District President. After the District President signs, she sends the form and photo to:

Dianne Diekmann, Chairman
LWML Nominating Committee
304 Golf Lane
Yankton, SD 57078
605-664-2001
E-mail: nominations@LWML.org

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