

The Lutheran Church – Missouri Synod – Missouri District Committee on Nominations

RECOMMENDATION FOR NOMINATION FORM

(Additional forms can be downloaded from the Missouri District Website: www.mo.lcms.org)

Please Print Clearly

Office or Board:

- | | |
|---|---|
| <input type="checkbox"/> Secretary | <input type="checkbox"/> Board of Directors (Ordained) |
| <input type="checkbox"/> Board of Directors (Commissioned) | <input type="checkbox"/> Board of Directors (Lay) |
| <input type="checkbox"/> Nominating Committee (Ordained) | <input type="checkbox"/> Nominating Committee (Lay) |
| <input type="checkbox"/> Nominating Committee (Commissioned) | <input type="checkbox"/> Council on Mission and Ministry (Lay) |
| <input type="checkbox"/> Council on Mission and Ministry (Commissioned) | <input type="checkbox"/> Council on Mission and Ministry (Ordained) |

Name of Recommended Person: _____

Address: _____
(Street Address) (City, State) (Zip Code)

Home Phone: (____) _____ Cell: (____) _____ Email: _____

Age: _____ Occupation: _____

Status (Check One): Ordained Minister Commissioned Minister Lay Person

Member of _____
(Name of Congregation) (City) (Circuit)

Qualifications:

1. Current Office in Congregation: _____

2. Past Service in Congregation/District/Synod: _____

3. Participation in Civic/Community Affairs: _____

4. Other Comments: _____

Recommended by:

Signature of Recommending Pastor or Officer of Recommending Congregation: _____

Name of Congregation: _____ Date: _____

Required Consent to Serve:

Has the person being recommended consented to serve in any duly elected office for which nominated and the ability to attend regular board or committee meetings? **Check:** Yes

FORMS MUST BE RETURNED NO LATER THAN JANUARY 6, 2025 TO:

Mrs. Sarah Irwin – Missouri District LCMS

660 Mason Ridge Center Dr., Suite 100 – St. Louis, MO 63141

nominations@mo.lcms.org