

Lutheran Church of Australia Eighteenth General Synod 2015 LCA NOMINATION FORM

please select **one** option below (not for Late Nominations)

3. Work and life experience			For election a	t General Convention o	f Synod	
Full address Postcode Email Telephone (h) (w) (m) (m) Member of Congregation For LCA Board, Council or Commission: Signature of nominee Date Nominated by congregation Date of Meeting Signature of Chairperson of Congregation. In accepting nomination, it is assumed that you have the time and ability to attend meetings, to actively participate at meetings, and to share in follow-up work between meetings. In addition, you agree to have your personal details as supplied entered into LAMP (or any subsequent system) and the LCA Yearbook and you agree to keep those details up to date. Information provided should reflect the last 10 years and be relevant for the board for which you are nominating. If there is insufficient space, please attach additional pages. 1. Involvement in the local congregation/parish (eg worship life; committees, friendship/study groups). [Pastors in parish situations need not complete this question].			For appointm	ent by General Church	Council (post-Synod)	
Full address Postcode Email Felephone (h)			For nomination	on by Congregation (see	e below)	
Postcode Postcode	Ful	l Name of Nominee				
Email Telephone (h) (w) (m) (m) Year of birth (Office use only) Occupation Member of Congregation For LCA Board, Council or Commission: Signature of nominee Nominated by congregation Date of Meeting Print name In accepting nomination, it is assumed that you have the time and ability to attend meetings, to actively participate at meetings, and to share in follow-up work between meetings. In addition, you agree to have your personal details as supplied entered into LAMP (or any subsequent system) and the LCA Yearbook and you agree to keep those details up to date. Information provided should reflect the last 10 years and be relevant for the board for which you are nominating. If there is insufficient space, please attach additional pages. 1. Involvement in the local congregation/parish (eg worship life; committees, friendship/study groups). [Pastors in parish situations need not complete this question]. 2. Church (LCA/District) experience/service	Ful	l address				
Congregation					Postcode	
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for LCA Board, Council or Commission: Date Date	Yea	ar of birth (Office use only)	-	Occupation		
Signature of nominee	Me	mber of			Congregation	
Nominated by congregation Date of Meeting Print name	for	LCA Board, Council or Com	mission:			
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4. Tertiary and/or other qualifications		Church (LCA/District) exp		lete this question].	ommittees, friendship/study groups).	
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