**Presbytery Nomination Form**

Committees

2023/2024

**Presbytery Committee Name:**

| Nominee: |  |
| --- | --- |
| Role: |  |
| Address: |  |
| Phone (Mobile): |  |
| Phone (Home): |  |
| Email Address: |  |

**Nominators** (two members of Presbytery):

| Name: |  |
| --- | --- |
| Signature: |  |
| Name: |  |
| Signature: |  |

**Acceptance:** I accept this nomination

|  |  |
| --- | --- |
| Print Name: |  |
| Signature: |  |
| Date: |  |

**Profile:**

A brief personal profile is required. Up to 100 words in dot point form, indicating positions currently held in the Church or community and any relevant experience or qualifications that will help Presbytery make its decision.

|  |
| --- |
|  |
|  |
|  |
|  |

**Please return this form to:** [secretary.presbytery@wa.uca.org.au](mailto:secretary.presbytery@wa.uca.org.au)