

The Uniting Church in Australia  
SYNOD OF WESTERN AUSTRALIA 2018-2019

**NOMINATION FORM FOR MEMBERS OF BODY APPOINTED BY UCWA**

**Nomination Details**

**Synod /Joint Body** (Circle as applicable):

**Name of body:** \_\_\_\_\_

**Position** \_\_\_\_\_

**Name of Nominee** (with title if appropriate) \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone No's** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Nominators** (Two members of Synod as appropriate)

**Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Acceptance: I accept this nomination:**

Signature (or other authorisation) \_\_\_\_\_ Date \_\_ \_\_ 2019.

**Experience / Qualifications:** *Please provide experience and qualifications relevant to the core business of this Committee/Commission*

**Personal Profile:** *A brief profile of the person being nominated is required in case there is a ballot required. Up to 100 words, in dot point form, indicating congregational membership, positions currently or previously held in the Church or community, and any special skills relevant to this position.*

**NOMINATIONS CLOSE THURSDAY 12 SEPTEMBER 2019 AT COB**

Any inquiries to be directed to the General Secretary or Maureen Bourke on 9260 9800 or

email: [maureen.bourke@wa.uca.org.au](mailto:maureen.bourke@wa.uca.org.au)