

The Uniting Church in Australia
SYNOD OF WESTERN AUSTRALIA 2020-2021

NOMINATION FORM FOR SYNOD STANDING COMMITTEE

Nomination Details

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 __ __ 2020.

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 10 SEPTEMBER 2020 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