



Eastern Washington-Idaho Synod
Evangelical Lutheran Church in America
God's work. Our hands.



2010 SYNOD ASSEMBLY

April 23-25, 2010 • Doubletree Hotel-Boise Riverside • Boise, ID
Synod Office: (509) 838-9871

• Nomination & Election Information •

Your participation is needed in the nomination and election process of the 2010 Eastern Washington-Idaho Synod Assembly, April 23-25, 2010. Nominations are needed for the following positions:

Consultation Committee ~ Two (2) - 6 year term ~ no re-election (See S11.02)

- 2 clergy (male or female) [term expire 2016]

Discipline Committee ~ Four (4) positions

- 2 clergy (male or female) [term expires 2016]
- 1 lay female [partial term expires 2011]
- 1 lay female [term expires 2016]
- 1 lay male [term expires 2015]

Nominating Committee ~ One (1) - 6 year term ~ no re-election

- Committee Chair (male or female)

Churchwide Assembly Voting Members

- two clergy (male or female)
- two (2) lay male
- one (1) lay female
- one (1) youth

All nominations to be included in the pre-Assembly voting member packet must be received by February 27, 2010.

Please copy as many of the accompanying nomination forms as you or your congregation may need. Please type or print information so that completed forms can be copied for voting members packets in the format they are received.

Nominations must be submitted on the Nomination Form and mailed to:

***Eastern Washington-Idaho Synod
314 S. Spruce Street, Suite A
Spokane, WA 99201-5823***

NOMINATION FORM ~ BIOGRAPHICAL INFORMATION

Eastern Washington-Idaho Synod of the Evangelical Lutheran Church in America

Position(s) Nominated: _____

Nominee: _____
(Title ~ First Name ~ Middle Initial ~ Last Name)

Address: _____
Street/Route City & State ZIP

Phone: Home: () _____ E-mail: _____

Please check **all** the applicable categories:

Lay Female Lay Male Clergy Youth Young Adult Multicultural

BACKGROUND OF NOMINEE: (Please do not use abbreviations)

1. OCCUPATION: _____

2. CONGREGATIONAL MEMBERSHIP: _____
(Name & Location of Congregation)

3. OCCUPATION & EDUCATIONAL EXPERIENCE:

4. CHURCH LEADERSHIP & PARTICIPATION:

*NAME OF PERSON MAKING NOMINATION: _____	
ADDRESS: _____ (Street ~ City ~ State ~ ZIP)	
PHONE: () _____	CONGREGATION MEMBERSHIP: _____
<i>*I explained the position, time requirement, and length of term to the nominee, and I received permission to submit his/her name.</i>	
_____ (Signature of Person Making Nomination)	_____ (Date Nomination Submitted)