



Nominating Committee

## Consent and Information Form for Pastoral Counselor 2019 Lutheran Women's Missionary League Convention

To the LWML Nominating Committee

I, \_\_\_\_\_ (please print), hereby consent to have my name submitted for consideration as nominee for Pastoral Counselor of the LWML for the 2019 LWML convention to be held in Mobile, Alabama, and agree to serve in this volunteer position for 4 years (2019 – 2023), if elected. I understand that submission of my name to the Board of Directors is contingent upon the approval of my congregation, my LCMS District President, and the President of The Lutheran Church—Missouri Synod.

Signature \_\_\_\_\_

Home address \_\_\_\_\_

Preferred mailing address – Home or Church \_\_\_\_\_

Preferred phone # \_\_\_\_\_ Email \_\_\_\_\_

LCMS District \_\_\_\_\_ LCMS District President \_\_\_\_\_

Signature \_\_\_\_\_

LCMS District President address \_\_\_\_\_

Years served in LWML

As Zone Counselor \_\_\_\_\_

As District Counselor \_\_\_\_\_

Please provide a vision statement as you see it, for the LWML of approximately 50 words or less. (If you are a candidate, this statement will be printed in the convention manual.)

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Other Information (Use additional pages if necessary)

Schools attended (include years of graduation) \_\_\_\_\_  
\_\_\_\_\_

Synod Activities \_\_\_\_\_  
\_\_\_\_\_

District Activities \_\_\_\_\_  
\_\_\_\_\_

Community Service \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ LWML District \_\_\_\_\_

**Send Nomination and Consent Forms to your LWML District President:**

Name and Address for nominating LWML District President:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LWML Pastoral Counselor Forms must be submitted to the LWML Nominating Committee by October 31, 2017.**