## Nomination Form

Northwest Washington Synod

5519 Phinney Ave N, Seattle, WA 98103-5899

206-783-9292 \* Bishop@lutheransnw.org

Nomination of Pastor for Call Nomination of:

[Click/tap and enter Pastor’s name.] for [Enter name of congregation].

Pastor/AIM/Diaconal Minister/Deaconess Congregation/Agency name and city

Presently serving at: Click or tap here to enter text.

Congregation or agency name and city

Known strengths of this nominee (use back if necessary)

1. Click or tap here to enter text.
2. Click or tap here to enter text.
3. Click or tap here to enter text.

Reason I feel this person should be nominated for this call (use back if necessary)

1. Click or tap here to enter text.
2. Click or tap here to enter text.
3. Click or tap here to enter text.

My nomination is prompted by:

personal acquaintance  word from others

request from candidate involved  other (use back for explanation)

This person  ***does*** /  ***does not*** have relatives in this congregation/agency.

Nomination submitted by: Click or tap here to enter text. Date: Click to enter a date.

**Return Nomination Form to the Assistant to the Bishop: a2b@lutheransnw.org**