

Eastern Oklahoma Presbytery
NOMINATION FORM

Please type or print.

Name of person being nominated: _____

Telephone Number: Home _____ Office _____

Mailing Address: _____

Church Membership (for lay persons) - please include both name of church and city:

Gender: _____ Male _____ Female

Age: _____ 25 & under _____ 26-45 _____ 46-65 _____ 65 & up

Racial/Ethnic Identification: _____ (A)sian, (B)lack, (H)ispanic, (N)ative American, (W)hite, (O)ther

Is the nominee: _____ an Elder? _____ a Certified Educator?
_____ a person with disabilities (we seek to include all people)

Endorsement for EOP Committee:

- | | |
|---------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Care of Church Professionals | <input type="checkbox"/> Permanent Judicial Commission |
| <input type="checkbox"/> Connecting Congregations | <input type="checkbox"/> Personnel |
| <input type="checkbox"/> Developing Cong's & Evangelism | <input type="checkbox"/> Preparation for Ministry |
| <input type="checkbox"/> Finance & Administration | <input type="checkbox"/> Representation |
| <input type="checkbox"/> Ministry | <input type="checkbox"/> Resourcing Congregations |
| <input type="checkbox"/> Mission | <input type="checkbox"/> Trustees |
| <input type="checkbox"/> Nominations | <input type="checkbox"/> Council (at-large member) |

Endorsement for other positions recommended by EOP Nominating Committee:

- Dwight Mission Agency Representative
- Dwight Inc. Representative
- Synod Commissioner (2011-12)
- General Assembly Commissioner (2012) (include letter of recommendation from Session)
- GA Young Adult Advisory Delegate (2012) (include letter of recommendation from Session)

Comments: _____

Nomination submitted by _____ Date _____ Phone _____

Please submit this form to: Nominating Committee
c/o Eastern Oklahoma Presbytery
700 S Boston, Suite 200
Tulsa OK 74119