

**BOARD OF DIRECTORS NOMINATION FORM****Last Name:** _____ **First Name:** _____**Address:** _____**Email:** _____ **Phone:** _____**Parish Name:** _____ **Parish member for** _____ **years.****School Council Member?** Yes No **School Council Name:** _____ **Council member for** _____ **years.**_____
Name of Pastor (please print)_____
Signature of Pastor_____
Signature of Nominee_____
Name of Nominator (please print)_____
Signature of Nominator

Nominees are to complete a one-page cover letter outlining their related experience for the position and aspirations in joining the Board

NOTE TO PASTOR: Pastor must approve the nomination before the candidate is approached by the nominator.