

NOMINATION FORM, page two, to be completed by Nominee

1. History and present positions of Christian service through the Diocese of Western Louisiana. [Give approximate dates]

A. Parish/Mission.....
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B. Diocese
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C. Province or National
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D. Community
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E. Please provide a brief description of occupational responsibilities - in or outside the home. [25 words or less]
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2. Please give us a brief explanation as to why you would like to serve in this office. (40 words or less)
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Signature of Nominee
Please indicate the address and phone number you would like to be published in the Diocesan directory if elected.

Address City State
Zip Phone E-mail

Deadline for Consideration: September 5, 2008
Return to: The Nominating Committee, P. O. Box 2031,
Alexandrix, LA 71309-2031