



Greater Milwaukee Synod  
Evangelical Lutheran Church in America

## Nomination Form

Please type or print clearly in block letters.

**Name** \_\_\_\_\_

### Nominating Information (all information required)

**Position (check one):**  Consultation  Discipline  Synod Council  Nominating  
 Churchwide Assembly  Audit  Candidacy  Other \_\_\_\_\_

**Representing (check one):**  At-Large  Conference \_\_\_\_\_

**Gender:** \_\_\_\_\_

**Pronouns:** \_\_\_\_\_

Gender non-binary or gender non-conforming people can be nominated to serve in any roles designated for gendered representation.

**(check one):**  Lay  Rostered Minister

### (check all that apply):

African American/Black  Asian American  European American  
 Latinx American  Native American  Other (specify) \_\_\_\_\_

Date of Birth \_\_\_\_\_ First language, if other than English \_\_\_\_\_

Member of Congregation (name and city) \_\_\_\_\_

### Personal Information

Address \_\_\_\_\_  
Street, City, State, Zip

Work Phone \_\_\_\_\_ Cell or Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Current Position/Employment \_\_\_\_\_

Education or other experience \_\_\_\_\_

List three significant church-service positions with dates

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List three significant community service positions with dates

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Return completed form to: Mary Romskog at [mary.romskog@gmselca.org](mailto:mary.romskog@gmselca.org), fax to 414-671-1756, or mail this form to the Greater Milwaukee Synod, PO Box 341695, Milwaukee, WI 53234. Questions? Call 414.671.1212.  
This form is available online at <https://milwaukee-synod.org/nominations>