DEADLINE: AUGUST 21, 2021





NOMINATION FORM

Please fill out one form per position or office.

		Clerical	Lay
Nominee:		Diocese:	
Address:			
			postal code
Phone: () Fax	:: ()	E-mail:	
is hereby nominated for the position / c	office of:		
· · · · · · · · · · · · · · · · · · ·		(one position per form, please)	
by us:		nd	
printed name		printed name	
signature		signature	
Address:			
,			
		s to be nominated for the above position the Canons of the Ecclesiastical Professional Professio	
inon.			
Signature of Nominee			
Experience and Gifts:			