SOUTHEASTERN SYNOD WELCA
Triennial Voting Member Nomination Form

Voting Member Information

Name		
Street Address		
City ST ZIP Code		
Home Phone/Cell Phone		
Work Phone		
E-Mail Address		
Congregation/Conference		
Church Address		

Availability

All Triennial Voting Members must be available to attend the Triennial Convention via Zoom on July 13 and 14, 2026. Times will be announced at a later time..

Other Personal Information

Age Category	Ethnic Background	Primary Language
☐ 20 – 29	☐ Asian	☐ English
☐ 30 – 39	☐ Black	☐ Spanish
☐ 40 – 49	☐ Caucasian	☐ Other (Please specify
☐ 50 – 64	☐ Hispanic	
☐ 65 & over	☐ Native American	

Previous Triennial Attendance

Has the nominee served as Triennial Voting Member in the past?

☐ No ☐ Yes (If yes, then please list when and for which SWO.)

PLEASE COMPLETE BOTH SIDES OF THIS FORM.

Southeastern Synod WELCA Triennial Voting Member Nomination Form (continued)

Qualifications & Experience

Please indicate those qualifications and experiences you feel would help this nominee in performing the duties of a Voting Member, such as training, experiences in the Women of the ELCA, community participation and vocational/occupational experience.

# of years	Office/Position held	Unit, Conference, Synodical, Churchwide, Community, Occupational

Additional Comments

Please add any other information that you feel would be helpful and relevant.

Submitted by Congregational Unit Leader(s)

Name (printed)	
Signature	
Date	

Concur (Pastor) Signature	
Date	

Please send this completed form along with a photo of the nominee to the Nominating Chair or Phyllis Wade at wade.phyllis73@gmail.com.

PLEASE COMPLETE BOTH SIDES OF THIS FORM.