

AMERICAN BAPTIST CHURCHES-OHIO LEADERSHIP NOMINATION FORM



"A spiritual gift is given to each of us so we can help each other" - 1 Corinthians 12:7 (NLT)

The Leadership of ABC-Ohio shall reflect the diversity of the Region with respect to the following criteria: **Giftedness, Location, Financial Expertise, Theological Training, Occupation, Education, Connectional Relationships, Gender, and Ethnicity.**

This nomination form will be used for possible appointment and nomination consideration for a period of two years from the date signed.

To learn more about the Mission and Vision of the American Baptist Churches-Ohio please visit our website. www.abc-ohio.org

*****Please return this form to the ABC-Ohio Region Office: 136 Galway Drive North, Granville, OH 43023***

Nominee Personal Information

Title: _____ Name: _____

Phone Number: _____ Email Address: _____

Gender: _____ Ethnicity: _____

Nominee Local Church Membership: Please be aware that active local Church Membership of an active ABC-Ohio affiliated church is required to serve on any ABC-Ohio boards/committees.

Church Name: _____

City: _____ Association: _____

Pastor's Name: _____ Pastor's Phone Number: _____

Does this Church Financially Support ABC-Ohio Missions? Yes No

Please list any/all positions held in your local Church:

Please share any positions/volunteer work in Local Association, ABC-Ohio Region, or Community (past & present):

Nominee Vocation/Responsibilities/Skills/Qualifications

Nominee Vocation: _____

Vocational Responsibilities: _____

Check any skills/qualifications/experience that the Nominee would bring to ABC-Ohio:

- ☐ Accounting/Banking/Finance
- ☐ Administration/Organization/Planning
- ☐ Advertising/Marketing/Public Relations
- ☐ Attorney/Law/Paralegal
- ☐ Business/Management
- ☐ Computer/Software/Technology
- ☐ Grant Writing/Technical Writing
- ☐ Human Resources
- ☐ Real Estate
- ☐ Seminary/Theology/Ohio Leadership Academy Graduate
- ☐ Social Media/Web Services
- ☐ Other: _____

I am interested in serving the ABC-Ohio Region in the following area(s):

Check any/all that apply:

- ☐ Regional Board Member
- ☐ Regional Board Officer
- ☐ State Advisory Committee on Ordination
- ☐ Leadership Academy
- ☐ Nominating Committee
- ☐ Other: _____

Has this Nominee served in any of these positions previously? If so, please tell us more.

Person Completing this form:

Nominee or Nominator

Name of Nominator: _____ Phone Number: _____

In signing this form I recommend that above person as a qualified individual to serve in ways that affirm his/her spiritual gifts, commitment to the local church and region, and dedication to our Lord and Savior Jesus Christ.

Signature of Nominator: _____

Church Membership: _____