



2024 Nomination Form

# Women of the ELCA Northwestern Minnesota Synodical Organization

Check below those positions in which the nominee is willing to serve. The individual nominated must consent to serve if elected. All terms are two year terms unless specified otherwise.

\_\_\_\_\_ President

\_\_\_\_\_ Treasurer

\_\_\_\_\_ Board Member (3 positions)

\_\_\_\_\_ Nominating Committee (3 positions-1 year)

Name of Nominee \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Office Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Person submitting nomination \_\_\_\_\_

Age \_\_\_\_\_ 34 or under \_\_\_\_\_ 35-50  
\_\_\_\_\_ 50-63 \_\_\_\_\_ 64 or over

Ethnic/Racial Heritage  
\_\_\_\_\_ American Indian \_\_\_\_\_ Black  
\_\_\_\_\_ Asian \_\_\_\_\_ Hispanic  
\_\_\_\_\_ Caucasian \_\_\_\_\_ Other \_\_\_\_\_

Primary Language other than English \_\_\_\_\_

Name of Congregation \_\_\_\_\_ Conference \_\_\_\_\_

Congregation Address \_\_\_\_\_

Participation in Women of the ELCA  
\_\_\_\_\_ regularly \_\_\_\_\_ occasionally \_\_\_\_\_ never

**Complete and return  
To: Shawn Brunelle  
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218-386-3644  
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