

RECOMMENDATION FOR SERVICE

General Synod, Associate Reformed Presbyterian Church

The Committee on Nominations is charged to seek out and nominate individuals best qualified to serve on the Boards, Committees and Agencies of the General Synod and as Officers of the General Synod. This form has been prepared by the Committee on Nominations for the purpose of recommending individuals to the Committee for consideration. A separate form must be used for each position recommended. Recommendations must be received by January 9, 2011. Submit completed forms to:

Committee on Nominations
Associate Reformed Presbyterian Center
One Cleveland Street, Suite 110
Greenville, SC 29601-3696

Very often, the members of the Committee on Nominations do not know the persons recommended. It is essential, therefore, that **ALL** recommendations include information that will help the Committee know more about the individual recommended. Proper consideration cannot be given without complete information. Each person recommended should have clearly confirmed a willingness to be nominated to the General Synod and should have been informed that nominees chosen by the Committee on Nominations will be asked to give satisfactory evidence of his or her belief and adherence to the basic doctrines of evangelical Christianity as adopted by the General Synod.

Please TYPE or use **black** ink so this form can be copied for Nominations Committee members.

NAME OF PERSON RECOMMENDED: _____

FOR: _____ (name of board/committee/commission)

MAILING ADDRESS _____

CITY, STATE, ZIP CODE _____

TELEPHONE NUMBERS: (H) _____ (O) _____

(FAX) _____ (CELL) _____

E.MAIL ADDRESS _____

CHURCH NAME: _____ YEAR AFFILIATED: _____

CURRENT CHURCH OFFICE: MINISTER: _____ RULING ELDER: _____ DEACON: _____

BACKGROUND INFORMATION AND QUALIFICATIONS: Please indicate profession, education, training, experience, interests and previous Synod, presbytery or local church service which qualifies this person for this recommendation. (Please add second page as needed)

Name of Presbytery, Session or Person making recommendation: _____

Telephone: _____ E.mail: _____

Date: _____

