

**INFORMATION FOR NOMINATIONS COMMITTEE  
2010**

**PRESBYTERY OF ARKANSAS**

Each year the Presbytery Nominations Committee presents a slate of nominees to serve on the committees and organizations of the presbytery. This committee must rely on you, the pastors and current members of all committees and organizations to provide the names of persons whom we might contact. The committee seeks qualified persons who will feel it is a privilege and joyous responsibility to serve their church in this manner, and who will make every effort to attend the meetings. The committees and organizations of presbytery are listed below. Space is provided for you to recommend individuals and comment on their qualifications for service. Thank you for your willingness to provide names for the Committee on Nominations.

Church and City/Town: \_\_\_\_\_

**COMMITTEES AND ORGANIZATIONS OF PRESBYTERY**

Administration  
Care & Nurture of Church Professionals  
Christian Education & Nurture  
Congregational Care & Development  
Mission  
Committee on Ministry (Elders Only)  
Preparation for Ministry  
Representation  
Disaster Preparedness & Response  
Ferncliff Board of Trustees

**INDIVIDUALS TO BE RECOMMENDED**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_  
Elder: (Yes)(No): \_\_\_\_\_ \* Age Group: \_\_\_\_\_ Sex: (M)(F) \_\_\_\_\_ Ethnic Heritage: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Marital Status: (M,S,W,D) \_\_\_\_\_  
Gifts, strengths, expertise: \_\_\_\_\_  
Disabilities: \_\_\_\_\_  
Committees for Consideration: \_\_\_\_\_  
Comments: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_  
Elder: (Yes)(No): \_\_\_\_\_ \* Age Group: \_\_\_\_\_ Sex: (M)(F) \_\_\_\_\_ Ethnic Heritage: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Marital Status: (M,S,W,D) \_\_\_\_\_  
Gifts, strengths, expertise: \_\_\_\_\_  
Disabilities: \_\_\_\_\_  
Committees for Consideration: \_\_\_\_\_  
Comments: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_  
Elder: (Yes)(No): \_\_\_\_\_ \* Age Group: \_\_\_\_\_ Sex: (M)(F) \_\_\_\_\_ Ethnic Heritage: \_\_\_\_\_  
Gifts, strengths, expertise: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Marital Status: (M,S,W,D) \_\_\_\_\_  
Disabilities: \_\_\_\_\_  
Committees for Consideration: \_\_\_\_\_  
Comments: \_\_\_\_\_

**COMMISSIONER TO SYNOD AND GENERAL ASSEMBLY**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Telephone: \_\_\_\_\_ Home Telephone: \_\_\_\_\_  
Elder: (Yes)(No): \_\_\_\_\_ \* Age Group: \_\_\_\_\_ Sex: (M)(F) \_\_\_\_\_ Ethnic Heritage: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Marital Status: (M,S,W,D) \_\_\_\_\_  
Gifts, strengths, expertise: \_\_\_\_\_  
Disabilities: \_\_\_\_\_  
Committees for Consideration: \_\_\_\_\_  
Comments: \_\_\_\_\_

**YOUTH ADVISORY DELEGATE TO GENERAL ASSEMBLY**

Must be between 17 and 23  
The last year your church had a Y A D: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Sex (M/F) \_\_\_\_\_ Ethnic Heritage: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Comments: \_\_\_\_\_

- \* Age Groups:
- (1) Grade 10 thru 25 years
  - (2) 26 to 35 years
  - (3) 36 to 55 years
  - (4) 56 to 64 years
  - (5) 65 years or over

Please return to: Presbytery of Arkansas, 9221 N. Rodney Parham Rd., Little Rock, AR 72227  
Attention: Pauline/Due Date February 23, 2010.