



The Episcopal Diocese of Montana

Nomination Form- 2024

Please print or type information

Committee being nominated for: _____

Nominee's name: _____

Address: _____

Telephone: _____ E-mail: _____

Name of Nominee's church: _____

How long has nominee attended his/her church? _____

Please list the church committees the nominee has served on or any other ministries at the church the nominee has supported

Is the nominee a communicant in good standing? YES/NO

(Please circle appropriate response)

Nominee's previous diocesan involvement:

How does the nominee support the mission and vision of the diocese?

DOES THE NOMINEE AGREE TO THIS NOMINATION?

YES / NO (circle as appropriate)