



Serving Christ, Enhancing Congregations, Connecting Communities

**NOMINATING COMMITTEE  
Self Referral Form  
We'd like to get to know you better**

Date \_\_\_\_\_

Last Name	First Name	Email Address
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Mailing Address	City	State	Zip
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Primary Phone	Work Phone	Cell Phone
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Church	Church City
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**I would be interested in serving in one of the following interest areas:**

- |                         |                          |                          |                          |                        |                          |
|-------------------------|--------------------------|--------------------------|--------------------------|------------------------|--------------------------|
| Administration          | <input type="checkbox"/> | Cultural                 | <input type="checkbox"/> | Diversity              | <input type="checkbox"/> |
| Education               | <input type="checkbox"/> | Financial                | <input type="checkbox"/> | Grant Writing          | <input type="checkbox"/> |
| Greater Church (the)    | <input type="checkbox"/> | Mission                  | <input type="checkbox"/> | New Pastors/Candidates | <input type="checkbox"/> |
| Property                | <input type="checkbox"/> | Retired Pastors          | <input type="checkbox"/> | Stewardship            | <input type="checkbox"/> |
| Training                | <input type="checkbox"/> | Visitation               | <input type="checkbox"/> | Vision                 | <input type="checkbox"/> |
| Volunteer at PWV Office | <input type="checkbox"/> | Work with Other Churches | <input type="checkbox"/> | Where Most Needed      | <input type="checkbox"/> |

(OVER)

**Listed below are the working groups of the Presbytery of Wabash Valley:**

- |                               |                          |  |                          |
|-------------------------------|--------------------------|--|--------------------------|
| Commission on Ministry        | <input type="checkbox"/> | Commission on Preparation for Ministry | <input type="checkbox"/> |
| Committee on Representation   | <input type="checkbox"/> | Council                                | <input type="checkbox"/> |
| Nominating Committee          | <input type="checkbox"/> | Personnel Ministry Team                | <input type="checkbox"/> |
| Permanent Judicial Commission | <input type="checkbox"/> | Stewardship Ministry Team              | <input type="checkbox"/> |
| Synod Commissioners           | <input type="checkbox"/> | Visioning Ministry Team                | <input type="checkbox"/> |

Please provide the following information to facilitate our commitment to balanced representation:

Male  Female

Age: under 25  25-35  36-50  51-65  65+

Ruling Elder  Teaching Elder  Deacon  Trustee  Member

Ethnic Identification: (Optional) Asian  Black  Caucasian  Hispanic  Other

Do You Need Special Accommodations To Serve: \_\_\_\_\_

\_\_\_\_\_

CAREER EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_

CHURCH EXPERIENCE (local congregation): \_\_\_\_\_

\_\_\_\_\_

EXPERIENCE IN THE GREATER CHURCH, IF ANY (Presbytery, Synod, General Assembly, etc.):

\_\_\_\_\_

WHAT ARE YOUR SPIRITUAL GIFTS? \_\_\_\_\_

\_\_\_\_\_

WHAT ARE YOUR HOBBIES/SPECIAL INTERESTS? \_\_\_\_\_

\_\_\_\_\_

**Please return to:**

[info@ourpresbytery.org](mailto:info@ourpresbytery.org)

Presbytery of Wabash Valley · P. O. Box 225, 707 Main Street · Rochester, IN · 46975-0225  
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[www.ourpresbytery.org](http://www.ourpresbytery.org)