

Nomination for Election Form – Conference President & Agency Boards/ Committees

2009 Annual Meeting of the Churches of Christ in Queensland



Please read the Information Sheets on ‘Elected Positions’ and ‘Constitutional Reform & Impact On Elected Positions’ before completing this form. If you are seeking to nominate for Council, then please use the separate ‘Nomination for Election Form – Conference Council’



To be completed by Nominee:

Position that you are nominating for (tick relevant O): *Term* *2009/10 Positions open for election*

Conference Officers

** O Conference President 2 Years 1

Agency Boards

** O Centenary Development Foundation 2 or 3 Years* 6

 O Churches of Christ Care 2 or 3 Years* 4

* For CDF the first half of open positions filled is for 3 years and the second half of open positions filled is for 2 years. The decision as to who fills which Care positions is made at the first Care board meeting as per sch2 sec6.3 of the CofCQld Constitution.

 O Historical Committee 1 Year 7

 O Global Missions Partners (Queensland) 1 Year 10

 O Property Board 1 Year 8

 O Women’s Ministries 1 Year 8

AND/ O Please tick here if you would like to be considered for the ‘new’ Board or any new advisory committees (which would OR only come into effect if the new constitution is ratified at the 2009 Annual Meeting).

Submit this form, the ‘Board Member Competency Assessment’ form, and a photocopy/scan of your Blue Card (if required) via email or post (details below) so that it is received by no later than Thurs 15th October 2009.

Email: admin@cofcqld.com.au
 Post: Steve Slade, EPO Office
 Churches of Christ in Qld
 P.O. Box 508
 KENMORE QLD 4069
Faxed applications cannot be accepted.

Full name:

Residential address:

Postal address:

Occupation:

Telephones:

Email:

Local CofCQld Church that you are a member of:

** **Blue card number** (only required for ‘Conference President’ & ‘Churches of Christ Care’ positions):

Brief details of leadership positions in local Church and/ or Conference along with any other supporting experience (please state details as you desire them published):

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Additional notes to this nomination (if required – refer to the ‘Elected Positions’ Information Sheet for more information. Please note that any information provided at this question is confidential and will not be publicly released):

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Declaration: *I declare that the information provided on this form and the attached ‘Competency Self Assessment’ form is to the best of my knowledge true and correct by virtue of the provisions of the Oaths Act 1867. I consent to being nominated for election and for the information provided on this form (except the ‘additional notes’ section) being used for election information purposes. I have received, read and agreed to the information concerning the requirements for standing for election as outlined in the ‘Elected Positions’ Information Sheet.*

Signature of Nominee: **Signature of Witness :**

Name of Nominee: **Name of Witness:**

Date: **Date:**

To be completed by a Church leader (e.g. Pastor, Elder, Conference Officer, etc.):

I, being an active member of the Associated Church known as and in the leadership position of with Conference/an Agency/ this Church, do hereby confirm that I have known the nominee for a period of and submit this nomination in the belief that the nominee is a suitable person to occupy the position indicated in this nomination.

Signature of Nominator: **Date:**

*** Please note that for this application to be accepted it must be submitted along with a completed ‘Board Member Competency Self Assessment’ form AND a photocopy/scan of a current Blue Card (if a Blue Card is required (see above)). Please read the Information Sheets on ‘Elected Positions’ and ‘Constitutional Reform & Impact On Elected Positions’ for more information ***