

St. Michael Parish Pastoral Council Selection Process

Nomination Form

If nominating yourself:

Name _____ Date of Birth _____

Address _____ Phone Number _____

_____ Cell Number _____

Best day/time to reach you _____

Primary Contact E-Mail _____ Marital Status _____

Years as Member of St. Michael Parish _____

Name of Parish where you were baptized _____

Name of parish where you were confirmed _____

Please use these lines to tell us about your faith journey up to this point in your life. Why would you like to serve on the Pastoral Council? What do you think you could bring to the Pastoral Council?

* * *

If nominating another person (please inform the person that you are nominating him/her, and why):

I (am/am not) Interested myself, but I would like to nominate the following Parishioner:

Nominee's Name _____

Nominee's Contact (Phone or E-mail) _____

I believe this person has a lot to offer the Pastoral Council because _____

Nominator's Name _____ Contact Number _____

(Reproduce this form as often as necessary)