

**Information Sheet
for potential Candidacy Committee Nominees**

Name: _____

City, State/Province: _____

Contact Info:

Phone: _____

email: _____

Your Current Ministry/Occupation:

Your Educational Background:

Your Professional/Ministry Background:

Your Experience in Regional/Denominational Committees:

What do you think you have to offer in service to the Candidacy Committee?

Why would you like to serve on the Candidacy Committee?

Name and Contact Information for someone in your classis who would be able to recommend you:

Submit this form to:

David Koll, Director of Candidacy, dkoll@crcna.org