

Regional Representative to Synod Council Nomination Form



ANGLICAN
DIOCESE OF
NIAGARA

Nominee's Name:

Email address:

Phone: Number:

Preferred Gender Identification:

Nominee's Parish Name & City:

Nominee's present & past parish and/or diocesan leadership roles:

Please respond to the following questions, using 75 words or less for each:

Why do you feel called to serve on synod council and what gifts or strengths would you bring as a member representing your region?

Some of the matters that Synod Council regularly deals with include oversight of the diocesan Mission Action Plan, property matters, finances, appointments, and policies. Please share something of your interest in these matters and what other wider church issues are of interest to you.

*Please email this form to the Nominations Committee c/o maryanne.grant@niagaraanglican.ca by **October 9, 2020**.*