

**WOMEN OF REFORM JUDAISM - SOUTHEAST DISTRICT**

**AS SOON AS POSSIBLE BUT NOT LATER THAN JUNE 30, 2010**

**CANDIDATE'S NOMINATION FORM**

for Board of Directors of Women of Reform Judaism – Southeast District

Two (2) Year Executive Committee Term: October 2010 – 2012

*(Must be typed or handwritten legibly in black ball point pen)*

**Candidate Information**

Name of Candidate: \_\_\_\_\_ e-mail: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: Day: \_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_ Evening: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

Name of Sisterhood with which affiliated: \_\_\_\_\_

Name of Congregation: \_\_\_\_\_

City, State \_\_\_\_\_

Sisterhood Activities – Local (Please give approximate dates of offices held)

Sisterhood Activities – District

Business or Profession: \_\_\_\_\_

**Consent and Declaration:**

I confirm that I am willing, if elected, to serve as an officer of the WRJ-Southeast Board of Directors for a 2-year period starting in October 2010. I understand that my attendance is expected at all District Executive Committee meetings, as well as the District Interim Meeting and Biennial Convention. By my signature, I give my consent for consideration by the District Nominating Committee.

Date: \_\_\_\_\_

Candidate Signature: \_\_\_\_\_

**Nominator Information**

This Nomination Form must be submitted by a member of the District Board of Directors. The President of each affiliated Sisterhood in good standing is a member of the Board of Directors.

**I nominate this woman for the position of:** \_\_\_\_\_

Name: \_\_\_\_\_ Signature \_\_\_\_\_

District Board Position: \_\_\_\_\_ Sisterhood: \_\_\_\_\_

Congregation (including city and state): \_\_\_\_\_

e-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_ day \_\_\_\_\_ evening

Please **send** this form to Wendy Adamson, Chair of the Nominating Committee, 2209 Palmetto Street, Clearwater, FL 33765 by June 30, 2010.