**Nomination Form – NZMWF PRESIDENT 2025-27**

**Nominee Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title** | Mr | Mrs | Ms | Miss | Rev | Dr | Prof (please circle) | | | | |
| **Surname** |  | | | | |
| **Given Names** |  | | | | |
| **Address:** |  | | | | |
| **Suburb / Town** |  | | **Post/Area Code** |  | |
| **Phone** | **Mob:** | **Alternative:** | | |
| **Email** |  | | | | |
| **District** | I am affiliated with the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District as a member of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parish/Congregation. | | | | |
| Insert photo here (or attach separately) |  | | | | |

**Profile of Nominee** (Use an additional sheet if required).

1. Please include a summary of the skills you will bring to the position you are being nominated for, and
2. Information about any roles held previously within NZMWF and/or the District making the nomination.

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**Please email completed form by Sunday 30th June 2024 to the NZMWF President:**

* Name: President Lesieli Tiulipe Pope
* Email: [lesielipope@gmail.com](mailto:lesielipope@gmail.com)

**Check List:**

1. **Nominee details and profile completed**
2. **Has the Nominee’s Photo been attached?**