

RECOMMENDATIONS TO COMMITTEE ON NOMINATIONS

Any member of a church within the Baptist General Convention of Oklahoma is invited to use this form to submit recommendations. The electronic form can be filled out online at www.BGCO.org, or the printed form may be mailed to the Nominating Committee, Baptist Building, 3800 N. May, Oklahoma City, OK 73112-6506, or faxed to 405/942-1339.

Recommendations must be received by July 23.

Believing this person to be personally committed to the Lordship of Jesus Christ and to the missionary endeavors of the Baptist General Convention of Oklahoma, I recommend:

1. Title _____ Dr. _____ Rev. _____ Mr. _____ Mrs. _____ Miss _____
2. Name _____
3. Address _____
City _____ Zip _____
4. Home Phone _____ Work Phone _____
5. Approximate age _____ Male _____ Female _____
6. Occupation _____
7. Ordained Minister _____ Yes _____ No _____
8. Church membership _____
9. City/town where church is located _____
10. Association _____
11. Involvement in local church:
 - (1) Frequency of attendance _____
 - (2) Major activity in church _____
 - (3) Supportive of Cooperative Program in church _____
In convention _____
12. Involvement and work within association _____

13. Prior service on state boards and committees _____

Check the board, commission, committee or office on which you believe this person could best serve:

- _____ Board of Directors, Baptist General Convention of Oklahoma
- _____ Board of Directors, Baptist Village Retirement Communities
- _____ Board of Directors, The Baptist Foundation of Oklahoma
- _____ Board of Trustees, Oklahoma Baptist Homes for Children
- _____ Board of Trustees, Oklahoma Baptist University
- _____ Audit Committee
- _____ Committee on Order of Business
- _____ Ethics & Religious Liberty Committee
- _____ Historical Commission
- _____ Assistant Recording Secretary
- _____ Historical Secretary
- _____ Recording Secretary

Please understand that your recommendation does not assure the person you are suggesting will be presented by the Nominating Committee to the state convention. However, your recommendation will be given serious consideration.

Name: _____
(Person making recommendation)

Mailing address: _____

Daytime telephone: _____

Date: _____