

Young Adult Advisory Delegate Nomination Form

Return by Friday, August 7th to Cheryl Battaglia programsecretary@pbygenval.org
Presbytery of Genesee Valley, 1190 Winton Road South, Rochester, New York 14618

The Session of _____, in _____, New York, places in nomination the following person as a Young Adult Advisory Delegate to

The Synod of the Northeast Assembly, October 29-30, 2015 Silver Bay, New York AND Synod of the Northeast Mission & Ministry Commission: January 29-30, April 1-2, June 3-4, and October 28-29, 2016

The General Assembly, June 18-25, 2016 Portland, Oregon

(✓ CHECK ONE OR BOTH)

Candidate Name: _____

Telephone: _____ E-Mail Address: _____

Mailing Address: _____

Date of Birth: ____/____/____ Cell Phone: _____

Education Completed (✓ CHECK ONE): High School College Graduate School

Please answer briefly on an attached sheet:

- #1. Why does the Session believe that the candidate should be a Young Adult Advisory Delegate for the Presbytery of Genesee Valley?
- #2. How is the candidate involved in the local church program and activities?
- #3. Has the candidate been involved in programs or activities sponsored by Presbytery, Synod, or General Assembly? If so, please list.
- #4. Has the candidate had experience conducting himself/herself in a mature manner away from home? Describe circumstances.

Checklist and signatures:

____ We have read the FACT SHEET and given a copy to the nominee and parent.

____ We have enclosed the Nominee's Brief Form of Expression

____ We understand that the nominee and an elder (one for each nominee) must attend the group interview on Tuesday, August 11th from 1:30 - 3:00 p.m. at the Presbytery of Genesee Valley office.

CLERK OF SESSION (SIGNATURE) _____

PARENT (SIGNATURE) _____

ACCOMPANYING ELDER Name _____ Phone _____