

**Louisiana Conference United Methodist Women
Potential Leaders Information
Talent Bank Form**

(Please Type or Print your information, using and attaching additional sheets as needed.)

Date _____ Name _____

Address _____

Phone: Home _____ Work _____ Cell _____

Local Church _____ District: AC BR LC MN NO SH

Age Range: 20s 30s 40s 50s 60s 70s 80s

Languages Spoken _____ Racial/Ethnic Group _____

Employed? Yes No Full Time Part Time

Professional skills, job experiences: _____

Office(s) Held in United Methodist Women

Office(s)	Date(s) of Service
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Local

_____ _____ _____	_____ _____ _____
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District

_____ _____ _____	_____ _____ _____
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Conference

_____ _____ _____	_____ _____ _____
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Jurisdiction

_____ _____ _____	_____ _____ _____
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Additional experience on the local, district, conference or general church levels or in the community:

Areas of Special Interest (I) or Concern (C):

<input type="checkbox"/> Secretarial	<input type="checkbox"/> Recruiting members	<input type="checkbox"/> Publicity
<input type="checkbox"/> Community	<input type="checkbox"/> Social issues	<input type="checkbox"/> Workshops
<input type="checkbox"/> Computer	<input type="checkbox"/> Creativity	<input type="checkbox"/> Newsletters
<input type="checkbox"/> Accounting	<input type="checkbox"/> Recording minutes	<input type="checkbox"/> Retreats
<input type="checkbox"/> Organization of details	<input type="checkbox"/> Public policy	<input type="checkbox"/> Music
<input type="checkbox"/> Nominations	<input type="checkbox"/> Public relations	<input type="checkbox"/> Youth
<input type="checkbox"/> Program Planning	<input type="checkbox"/> Community building	<input type="checkbox"/> Children
<input type="checkbox"/> Administration	<input type="checkbox"/> Inclusiveness/pluralism	<input type="checkbox"/> Other: _____

Which office(s) on the Conference UMW Team would you most like to hold given the opportunity to serve?

<input type="checkbox"/> President	<input type="checkbox"/> Chair, Committee on Nomination	<input type="checkbox"/> Social Action
<input type="checkbox"/> Vice President	<input type="checkbox"/> Education & Interpretation	<input type="checkbox"/> Spiritual Growth
<input type="checkbox"/> Secretary	<input type="checkbox"/> Membership Nurture & Outreach	<input type="checkbox"/> Program/Mission Resources
<input type="checkbox"/> Treasurer		<input type="checkbox"/> Communications Coordinator

Specify other talents or skills: _____

Why are you interested in this position and what qualifications do you feel you have for the office you chose?

Would you be able to use your gifts and talents to uphold and strengthen UMW through the PURPOSE of the organization? Yes No **Please explain:** _____

Is it possible for you to be away from your home or employment for Full Day? Weekend? Extended Time? Yes No

I am sorry I am unable to accept an office this year. Please keep my name on file and contact me in (year) _____.

Please give any other information you feel is pertinent: _____

The PURPOSE of United Methodist Women The organized unit of United Methodist Women shall be a community of women whose PURPOSE is to know God and to experience freedom as whole persons through Jesus Christ; to develop a creative, supportive fellowship; and to expand concepts of mission through participation in the global ministries of the church.

Thank you for your interest, and time! Chair and Members, Louisiana Conference UMW Committee on Nominations.

Return Form to:
Sandy DeCelle, 1911 Pargoud Boulevard, Monroe, LA 71201
318-381-1448 ; E-mail: sandydecelle@yahoo.com