

**PRESBYTERIAN ASSOCIATION OF CHAUTAUQUA  
P.O. Box 1039 Chautauqua NY 14722**

**NOMINATION FOR CHAPLAIN OF THE WEEK**

**Instructions:**

- Nominators should fill out candidate's name, address, email and Nominator Information. Save document and email to Nominee.
- Nominee then answers questions and completes church/education section. Save and email completed form to [jmorgan@mywpc.org](mailto:jmorgan@mywpc.org).

**Note:** Nominations must be resubmitted after three years.

**DATE** \_\_\_\_\_

**CANDIDATE INFORMATION** (must be an ordained Presbyterian clergy)

**Name** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Preferred telephone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Church** \_\_\_\_\_

**Church Address** \_\_\_\_\_

**Church website and email** \_\_\_\_\_

**Have you ever been to Chautauqua? Y/N**

**If so when and for how long?** \_\_\_\_\_

**Type of Ministry** \_\_\_\_\_ **How long** \_\_\_\_\_

**Educational Background**

**Will Spouse Accompany You? Y/N**

**Name** \_\_\_\_\_

**Children? If so please list birthdates** \_\_\_\_\_

\_\_\_\_\_

**NOMINATOR INFORMATION**

**Name** \_\_\_\_\_

**Home Address, City, State, Zip** \_\_\_\_\_

\_\_\_\_\_

**Preferred telephone** \_\_\_\_\_ **Email** \_\_\_\_\_

**What is your association with the Presbyterian Association?**

\_\_\_\_\_

**Please describe why you are nominating the candidate.**