



2026 SYNOD ASSEMBLY BISHOP CANDIDATE NOMINATION FORM

NOMINEE:

Name: _____

Please note: The nominee MUST be an ordained pastor (Minister of Word and Sacrament) rostered in the Evangelical Lutheran Church in America.

Current position or status: _____

Phone number: _____

Email address: _____

NOMINATOR:

Name: _____

Congregation: _____

Phone number: _____

Email address: _____

I have contacted the nominee and the nominee is willing to stand for election and to serve as bishop, if elected.

_____ **Yes** _____ **No**

To be submitted in person by a voting member at the assembly desk
between 9:10 and 9:40 a.m. on Friday, May 15.