

**SC CONFERENCE UNITED METHODIST WOMEN
TALENT BANK INFORMATION ON PROSPECTIVE LEADERSHIP**
(To be completed by prospective leader)

Date Completed _____ Date Received _____

Name _____ Race/Ethnic Group _____

Street/PO Address _____ E-mail _____

City, State & Zip Code _____

Telephone: Home (____) _____ Work (____) _____

Local Church _____ District _____

Age (Please check one): 20s ☐ 30s ☐ 40s ☐ 50s ☐ 60s ☐ 70s ☐ 80s ☐

Marital Status _____ Employment Status _____

Professional skills, job experience _____

Experience in United Methodist Women (or predecessor groups):

ELECTED OFFICE	LOCAL (DATES)	DISTRICT (DATES)	CONFERENCE (DATES)
President			
Vice President			
Secretary			
Treasurer			
Secretary of Program Resources			
Spiritual Growth			
Social Action			
Education & Interpretation			
Membership Nurture & Outreach			
Communications Coordinator			
Chair, Nominating Committee			
Member, Nominating Committee			

Additional experience on the local, district, conference or general church level (other than UMW)
or in the community _____

Special talents or skills _____

Areas of special interest or concern:

<input type="checkbox"/> Administration	<input type="checkbox"/> Community Building	<input type="checkbox"/> Nominations
<input type="checkbox"/> Program Planning	<input type="checkbox"/> Recruiting Members	<input type="checkbox"/> Retreats
<input type="checkbox"/> Secretarial	<input type="checkbox"/> Inclusiveness/Pluralism	<input type="checkbox"/> Computer
<input type="checkbox"/> Recording Minutes	<input type="checkbox"/> Social Issues	<input type="checkbox"/> Creativity
<input type="checkbox"/> Accounting/Bookkeeping	<input type="checkbox"/> Public Policy	<input type="checkbox"/> Music
<input type="checkbox"/> Organization of Details	<input type="checkbox"/> Communication	<input type="checkbox"/> Children
<input type="checkbox"/> Workshops	<input type="checkbox"/> Newsletters	<input type="checkbox"/> Youth
<input type="checkbox"/> Public Relations	<input type="checkbox"/> Publicity	<input type="checkbox"/> Other (specify) _____

Which offices(s) on the Conference United Methodist Women's Team would you be most interested in serving?

<input type="checkbox"/> President	<input type="checkbox"/> Social Action
<input type="checkbox"/> Vice President	<input type="checkbox"/> Membership Nurture & Outreach
<input type="checkbox"/> Secretary	<input type="checkbox"/> Secretary of Program Resources
<input type="checkbox"/> Treasurer	<input type="checkbox"/> Communications Coordinator
<input type="checkbox"/> Spiritual Growth	<input type="checkbox"/> Nominating Committee
<input type="checkbox"/> Education & Interpretation	

Why are you interested in this position and what qualifications do you feel you have for your office(s) of choice? _____

Would you be able to use your gifts and talents to uphold and strengthen United Methodist Women through the PURPOSE of the organization? _____

Is it possible for you to be away from your home or employment for:

☐ Full Day ☐ Weekend ☐ Extended Time

Comments _____

Please give any other information you feel is pertinent _____

Please give one personal reference: Name _____

Address _____

Phone _____

Please return to Chair, Committee on Nominations

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