**SECULAR FRANCISCAN ORDER**

**ACCEPTANCE OF NOMINATION**

**Dear:**

**You have been nominated as a candidate for the office of:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Office**  | **Accept**  | **Do not accept**  | **Office**  | **Accept**  | **Do not accept**  |
| **( ) Minister**  | **\_\_\_\_\_\_\_** **Initial**  | **\_\_\_\_\_\_\_\_\_\_** **Initial**  | **( ) Secretary**  | **\_\_\_\_\_\_**  **Initial**  | **\_\_\_\_\_\_\_\_\_\_\_\_** **Initial**  |
| **( ) Vice-Minister**  | **\_\_\_\_\_\_\_** **Initial**  | **\_\_\_\_\_\_\_\_** **Initial**  | **( ) Treasurer**  | **\_\_\_\_\_\_\_**  **Initial**  | **\_\_\_\_\_\_\_\_\_\_\_\_****\_ Initial**  |
| **( ) Formation Director**  | **\_\_\_\_\_\_\_\_**  **Initial**  | **\_\_\_\_\_\_\_\_\_\_** **Initial**  | **( ) Councilor**  | **\_\_\_\_\_\_\_\_**  **Initial**  | **\_\_\_\_\_\_\_\_\_\_\_\_**  **Initial**  |

**For the term of:**

**The completion and return of this form will indicate your willingness to serve, if elected. Council position obligations are outlined in OFS Constitutions, Articles 49-52. I understand that, if elected I have a responsibility to fulfill the obligations of that position, attend scheduled Council meetings and assist as necessary with initial/ongoing formation. I also attest that I meet the minimum qualifications to be a nominee (based on the OFS constitution and Regional Governance Norms).**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature**

**Date and Place of Profession:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If you cannot serve in ANY capacity, at this time, please designate below with your signature.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature Date**

(Rev. (087/23/18)