



**North Dakota District Lutheran Women In Mission
Candidate Resume Form**
(Feel free to use additional page for more text)

Name: _____

Home Congregation: _____ Zone: _____

Address: _____

Telephone: Home & Cell: _____

Email: _____

LCMS Member since: _____

Offices/Committees (local cong): _____

LWML – Unit: _____

LWML - Zone/District: _____

Community: _____

Vocation: _____

Education: _____

Personal Info
(Family) _____

Favorite Bible Verse: _____

What does LWML mean to me: _____

This serves as my consent to serve if elected to the North Dakota LWML Board of Directors:

Signed _____ Date _____

RETURN TO: Dianne Loll
PO Box 370
Hankinson, ND 58041

Home: 701-242-7706
Cell: 701-899-2694
Email: dndloll@rrt.net