Official Biographical Information Form For Vice President of the South Carolina Synod – 2025 Election

| Full Name: | | Date of Birth: | |
|--|---------------------------|------------------|--|
| Home Congregation: | | City: | |
| Home Phone: | Cell Phone: | | Work Phone: |
| Email: | Profession: | | Employer: |
| List up to 4 community, civic groups, professional organizations that you are involved in and would inform your service as Vice President (please include dates of service): | | | |
| List up to 4 ways you serve in your loca your service as Vice President (please | | | chwide activities that would inform |
| What do you see as the principal challo | enge to this synod in the | next 6 years, an | d how would you address it? |
| Describe your leadership style: | | | |
| Please share with us a biblical passage or touchstone during your work as VP | | t to you and hov | v that will serve as a guiding principle |