

# DEACON NOMINATION FORM

## INSTRUCTIONS FOR INDIVIDUAL MAKING RECOMMENDATION

It is very important that you do not inform the candidate of this recommendation. The candidate will be contacted by the New Deacons Committee (NDC) if and when it becomes appropriate.

Refer to I Timothy 3:8–12 for Deacon qualifications and prayerfully consider your recommendation.

Complete as much of this form as you can from your personal knowledge. Do not worry about leaving some blank spaces. The NDC will follow up.

### Information about the gentleman being recommended:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Primary Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

Age \_\_\_\_\_

Marital Status  Never married  
 Married  
 Remarried  
 Separated  
 Divorced  
 Widowed

Name and Ages of Children (if known) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previously ordained?  Yes  
 No  
 Do not know

If yes, please give the name of church:  
\_\_\_\_\_

List church activities in which you have personally participated with the candidate and any other church activities in which you know he is involved:

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Describe the candidate's character and why you are recommending him for consideration:

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In your opinion, what leadership and/or service skills does the candidate possess?

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**Information about the Individual making the recommendation:**

Name	_____
Address	_____ _____
City, State, ZIP	_____
Primary Phone	_____
E-mail	_____
Sunday Bible Study (Sunday School)	_____
Today's date	_____

Please print, fill out and return these pages to:

Charles R. Poor  
Houston's First Baptist Church  
7401 Katy Freeway Houston, TX 77024