

**Patron: Arch Bishop**  
 Rt. Rev. Dr. Mathew Moolakatt  
 (Bishop of Arch Eparchy of Kottayam)  
**Spiritual Director:**  
 Fr. Thomas Mulavanal



1800 E Oakton St,  
 Des Plaines, IL 60018  
 (773) 736-7611  
 A NOT FOR PROFIT  
 ORGANIZATION

**KCCNA NATIONAL COUNCIL MEMBER NOMINATION FORM**

**FOR THE POSITION:**

KCCNA NATIONAL COUNCIL MEMBER.....

KCCNA NATIONAL COUNCIL MEMBER (YOUTH).....

KCCNA NATIONAL COUNCIL MEMBER (WOMEN).....

LAST NAME ..... : \_\_\_\_\_

FIRST NAME..... : \_\_\_\_\_

MIDDLE NAME ..... : \_\_\_\_\_

FAMILY NAME..... : \_\_\_\_\_

DATE OF BIRTH & AGE..... : \_\_\_\_\_

KCS MEMBER SINCE: (MM/DD/YYYY)..... : \_\_\_\_\_

ADDRESS..... : \_\_\_\_\_

PHONE NO..... : \_\_\_\_\_

PARISH IN INDIA ..... : \_\_\_\_\_

SOCIAL BODY MEMBER? ..... :  YES .....  NO

DID YOU SERVE MINIMUM OF 2 YEARS IN ANY OF THE  
 BRANCHES OF BOARD OF DIRECTORS OF KCS ? ..... :  YES .....  NO \_\_\_\_\_ (WHICH YEARS)

**RECOMEMENDED BY:**

**1** LAST NAME ..... : \_\_\_\_\_

FIRST NAME..... : \_\_\_\_\_

ADDRESS..... : \_\_\_\_\_

PHONE NO..... : \_\_\_\_\_

KCS MEMBER SINCE: (MM/DD/YYYY)..... : \_\_\_\_\_

SIGNATURE ..... : \_\_\_\_\_

**2** LAST NAME ..... : \_\_\_\_\_

FIRST NAME..... : \_\_\_\_\_

ADDRESS..... : \_\_\_\_\_

PHONE NO..... : \_\_\_\_\_

KCS MEMBER SINCE: (MM/DD/YYYY)..... : \_\_\_\_\_

SIGNATURE ..... : \_\_\_\_\_

NOMINATION FEE (AS DONATION) \$250 PAID TO K.C.S. :  CASH .....  CHECK

I, \_\_\_\_\_ DO HEREBY AFFIRM THAT THE INFORMATION PROVIDED IN THIS FORM ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I FULLY UNDERSTAND THAT IF ANY OF THE INFORMATION PROVIDED ABOVE FOUND TO BE WITHHELD OR INCORRECT, THIS NOMINATION CAN BE REJECTED. I ALSO UNDERSTAND THAT THE NOMINATION FEE IS NON-REFUNDABLE.

SIGNATURE (CANDIDATE) \_\_\_\_\_ DATE: \_\_\_\_\_

<b><u>FOR OFFICE USE ONLY</u></b>	
NOMINATION RECEIVED ON (DATE) _____	RECEIVED BY: _____
NOMINATION <input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	
SIGNATURE (LIAISON BOARD CHAIRMAN) _____	DATE: _____
NAME OF LIAISON BOARD CHAIRMAN _____	
COMMENTS (LIAISON BOARD) : _____	

**NOTE:** NOMINATIONS TO BE SUBMITTED TO THE KCS LIAISON BOARD CHAIRMAN ON OR BEFORE AUGUST 30<sup>TH</sup> OF THE ELECTION YEAR