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## The Catholic Community of Gloucester & Rockport

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Holy Family Parish & Our Lady of Good Voyage Parish  
74 Pleasant Street · Gloucester, Massachusetts 01930 · Phone: 978-281-4820

### PASTORAL COUNCIL NOMINATION FORM Please provide all necessary information.

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Your Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### QUESTIONS FOR PRAYER & DISCERNMENT If necessary, please use a separate sheet of paper.

1. What is the nature of your relationship with your nominee (i.e. family, friend, fellow parishioner)?
2. In what ways is your nominee involved in the life of our parish communities?
3. In what ways is your nominee committed to building and strengthening the collaboration between Holy Family Parish and Our Lady of Good Voyage Parish?
4. Are you confident that your nominee can work constructively with our pastor and pastoral team?  
If so, why?
5. Overall, why do you think your nominee is well suited to serve on our pastoral council?