

**Appendix - I**

*In the Name of Allah, the Most Compassionate, the Most Merciful*

**Nomination Form for the Position of Trustees of Islamic Center Of Maryland**

***This form should be completely filled before submission. Failure to complete any part may void the nomination***

**Name of the Person You are Nominating.....His/Her Phone#.....**

I ..... the undersigned do affirm that the individual I am nominating fulfills the requisites of the ICM by-laws. In nominating the above mentioned individual I am observing the Islamic guidance of the prophet (peace be upon him) and the Khulafa-ar-Rashideen:

- The Prophet peace be upon him said: “Whoever puts a man in charge of a group of people while he knows that someone else (in the group) is more pleasing to Allah (to be in that position), then he has betrayed the trust of Allah, betrayed the trust of his messenger, and betrayed the believers” narrated by Al-Hakim in his authentic book of Hadith.
- Omar Ibn Al-Khattab, may Allah be pleased with him, said: “whoever becomes in charge of a matter concerning Muslims then he appoints a man because of the friendship or kinship between them, he has betrayed Allah, his messenger, and the Muslims.”

NO.	PLEASE PROVIDE THE FOLLOWING INFORMATION ABOUT THE INDIVIDUAL BEING NOMINATED
1.	“Consistent with, and a follower of the Qur’an and the Sunnah, and the opinions of Ahlus-Sunnah Wal Jama’ah” <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure Please elaborate (use additional page if necessary):
2.	“Punctual in attending the Friday congregational prayer and other congregational prayers to the best of his abilities” <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure Please elaborate (use additional page if necessary):
3.	“Active, aware of current Islamic issues of scholarly interest and willing to help Muslims” <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure Please elaborate (use additional page if necessary):
4.	“Knowledgeable of the Islamic jurisprudence (Fiqh) pertinent to the everyday affairs of Muslim life” <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure Please elaborate (use additional page if necessary):
5.	“Served as volunteer for ICM for two years” <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
6.	“A member for at least two years” <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
7.	Please elaborate on the participation of the nominee in ICM activities and the scope of services rendered (use additional page if necessary):

Nomination suggested by: \_\_\_\_\_ Phone \_\_\_\_\_

**Nominating Member’s**

Signature \_\_\_\_\_ Date \_\_\_\_\_