

BOARD MEMBER NOMINATION FORM

SCHOOL:	DATE:	
NAME:		
ADDRESS:		
	67475	=10
CITY:	STATE:	ZIP:
TELEPHONE: ()	EMAIL:	
CONSTITUENCY:		
□ ALUMNI		
☐ BUSINESS / COMMUNITY LEADER		
□ CLERGY		
☐ PARISHIONER		
□ PARENT		
☐ PAST PARENT		
GRANDPARENT		
OTHER		
BUSINESS INFORMATION:		
TITLE:		
ORGANIZATION / BUSINESS:		
TELEPHONE: ()	EMAIL:	
POTENTIAL COMMITTEE ASSIGNMENT(S) IF II	NVITED TO SERVE ON TH	HE BOARD:
☐ FINANCE		
☐ ENROLLMENT MANGEMENT / MARKETING		
□ DEVELOPMENT		
□ FACILITIES		
☐ GOVERNANCE		
□ OTHER		

THE SKILLS, GIFTS, WISDOM YOU FEEL THE CANDIDATE MIGHT BE ABLE TO OFFER THE BOARD:
PROFESSIONAL SKILLS:
PERSONAL TALENTS:
EXPERTISE FROM PAST EXPERIENCES:
SPECIAL INTERESTS:
ANY AFFILIATIONS (WITH INDIVIDUALS, CORPORATIONS, FOUNDATIONS) THAT MIGHT BE HELPFUL:
OTHER BOARD EXPERIENCE (INCLUDING POSITIONS SERVED):
OTHER:
ADDITIONAL COMMENTS:
NOMINATOR NAME: