



Oregon Association for the Education of Young Children

Governing Council Nomination Form

You may nominate yourself or someone else. Please complete this form and return it to **ORAEYC Nominations, PO Box 60, Gladstone OR. 97027** or email to sara@oregonaeyc.org or Fax to 503-496-0520 (Please print or type)

Name of nomination: _____

Contact information: phone (h) _____ (w) _____

Address: _____

Email: _____

Please check the position(s) for which this person (or you) is best qualified (** positions currently open):

_____ Vice President (2 year commitment)

___ Membership Committee

_____ Treasurer (co-position 2 year commitment)

___ Communications/Publications Committee

___ Conferences/Professional Development Committee

_____ **Other (If you are interested in knowing more about our board work and committees, please complete this form and return it to ORAEYC.

Why do you believe this person would be a good fit for the ORAEYC board?

Occupation: _____ Years in the field: _____

AEYC activities, previous board experience or other leadership roles:

How might this person meet the goal of establishing and maintaining a Governing Council reflecting diversity in ethnicity, professional setting and experience, gender, age, and ideas?

Has this person agreed to be considered? Yes ___ No ___ Person submitting (if not yourself): _____

Contact information _____