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)

_____ Treasurer (co-position 2 year commitment)

_____ **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_________________________________________________________