



Board Nomination Form

Candidate Information

Name _____

Home phone number _____

E-mail address _____

Work phone number _____

Employment/Position _____

Education _____

Previous volunteer experience (if any)

Please check any of the following skills or experience that the candidate possesses.

Finance, accounting

Management, administration, business process

Legal

Community engagement, local/state govt.

Education, teaching, youth development

Nonprofit management

Fundraising, development

Public relations, communications

Other _____

Affiliations or organizations, especially positions of leadership (e.g., professional, civic).

Why candidate would be an addition to Board or
Why I would like to serve (for self-nominations)

Please complete this section if you are nominating yourself

I do or do not have any current or potential conflicts of interest that would prevent me from serving on the board. (For example: board member or staff of competing program, family members employed by Lextended Day, support for any legal claim or action made against Lextended Day)

I understand do not understand but am willing to learn about the fiscal and oversight functions of a board of directors under both regulations and best practices

I can meet the commitments of the board member job description.

Please complete this section if you are nominating someone else:

Name _____ Date _____
Phone _____ E-mail _____

Has this person been contacted to determine their interest in being nominated?

Yes No

If "yes," would he/she be willing to serve if elected?

Yes No

Do you believe there are any potential conflicts of interest with this candidate?

Yes No

Thank you for your nomination

Office use

Met with nomination committee on _____

Nominating committee

approves

did not approve