Nomination Form

Board of Directors Membership

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| **Contact Information** |
| Nominee Name: |  |
| Company Name: |  |
| Work Address: |  |
|  |  |
| Home Address: |  |
|  |  |
| Work Phone: |  | Cell Phone: |  |
| Home Phone: |  | Home Email: |  |
| Work Email: |  | LinkedIn Account: | Yes \_\_\_\_ No\_\_\_\_\_ |

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| **Personal Information – *Please use back or additional sheets if necessary.*** |
| Please explain how the nominee would contribute to the Partnership’s mission as a board member: |
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| What work experience or expertise would this nominee bring? (attach resume if helpful) |
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| List experiences as a volunteer (including boards, committees, other community service): |
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| Nominee, please list your personal reasons for being willing to serve on the Partnership board: |
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| **Authorization** |
| *The undersigned certify that the above information is true and accurate and permission is given to use the above information for nomination purposes.* |  |

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|  Printed Name of Nominee |  |  Signature of Nominee |  |  Date |
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|  |  |  |  |  |
| Printed Name of Board MemberSubmitting Application |  |  Signature of Board Member Submitting Application |  |  Date |

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| **Personal Information – *Page 2 (if applicable)*** |
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