

## Board of Directors Potential Candidate Form

Date of Application \_\_\_\_\_

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Mobile Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

Current Occupation \_\_\_\_\_

Highest Level of Education \_\_\_\_\_

What is your membership affiliation with PWSA-WI?

Individual Member    Family Member    Professional Member    Not a member

Position you are interested in running for? All terms are 2 years unless otherwise indicated.

President    Vice President    Secretary    Treasurer    Board Member

Why are you interested in serving on the PWSA-WI, Inc. Board of Directors?

How have you already been involved in PWSA-WI, Inc? List all committee service, volunteer activities, projects involved with, etc.

What are the area(s) of expertise/contributions you believe you can make to PWSA-WI, Inc. as a member of the Board of Directors?

Please list past and current professional and membership associations; community organizations; volunteer activities; and relevant employment experience (attach a resume if possible):

Please list prior and/or current experience on any Board: