



NASB Board of Directors Nomination Form for Region #12

THIS FORM MUST BE RECEIVED AT NASB BY AUGUST 21, 2015

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Home

Work

Cellular

Email Address: _____

Local Board Service

Name of local school board: _____

Years of service on local board: _____

Attendance record on local board: (past 3 yrs.) _____

Current office held on local school board: _____

Past offices held on local school board: _____

Association Participation

State Conferences: _____

National Conventions: _____

Workshops: _____

Awards Received: _____

Other Education-Related Public Service

Commissions, Task Forces, and Committees: _____

Personal Information

Occupation: _____

Educational Background: _____

Community Activities: _____

Awards and Recognitions: _____

Hobbies and Activities: _____

This nomination is submitted by:

Name of NASB Member District or ESU: _____

Name of Board President or Vice President: _____

Date: _____

☐ By checking this box, I assert the board president or vice president has read the completed Nomination Form and verifies its authenticity.

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Return to: NASB
Sallie Svatora
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Lincoln, NE 68502
Or via e-mail to ssvatora@nasbonline.org