

DABA BOARD NOMINATION FORM

Candidate Information

Name: _____

Home address: _____

Home phone number: _____

Email address: _____

Work phone number: _____

Employment/Position: _____

Education: _____

Previous experience (if any) with (name or org): _____

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

Finance/Accounting

Grant writing

Fundraising/Special Events

Public relations/Communication

Other _____

Management/Administration

Nonprofit experience

Teaching experience/Curriculum development

Contacts/Networking

Other _____

Affiliations or organizations the candidate belongs to (e.g., membership, professional, civic).

Submitted By

Name _____ Date _____

Phone _____ Email _____

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

Thank you for your nomination!

Please send completed forms to:

526 N West Ave- PMB 105

Arlington WA 98223 (Attn: Marilyn Oertle)

OR

Bring it to the DABA Member Meeting, Wednesday November 4th at 6:15pm

If you have any questions, please send them to admin@arlingtonwa.org