APPLICATION FOR POSITION ON BOARD OF DIRECTORS

Name _____

Address _____

Check one: ___ NWESD 189 Director
___ Local School Board (district _____) District _____

BIOGRAPHICAL SKETCH

Training: _____

_____

_____

Community and/or School Activities:_____

_____

_____

_____

Special Interests: _____

_____

_____

_____

Why do you wish to be appointed to the Board of Directors? _____

_____

_____

_____

If appointed to a position on the Board of Directors, I agree to serve within the framework of the policies of the school district or NWESD 189, as appropriate.

_____ _____
Signature of Candidate Date