61 TEOCALLI ROAD, CRESTED BUTTE, CO 81224 PHONE (970) 349-1162, WEBSITE: www.cbsouth.net

2024 BOARD MEMBER NOMINATION FORM

Candidate Information (must be a member in good standing)

Name	
Home address	
Home phone number	
E-mail address	
Work phone number	
Employment/Position	
Previous experience (if any) with (name or or	rganization)
Please circle any of the following skills or expe	erience that the candidate possesses.
Finance, accounting	Management, administration
Grant writing	Nonprofit experience
Fundraising and special events Public relations, communications Other	Teaching experience, curriculum development Contacts, networking Other
Affiliations or organizations the candidate belo	ongs to (e.g., membership, professional, civic).
Write a brief biography with your reason for	wanting to serve.
Are you willing to serve a 2-year position if electe	d? □ Yes □ No

Please submit your nomination to the CBSPOA by 4 PM, July 11, 2024.