



BOARD OF DIRECTORS APPLICATION FORM

Please complete and return to the PA-TSA Office
Attn: Chairperson, Board Development/Nominating Committee

Name _____ SS# _____

Home Address _____

City _____ State _____ ZIP _____

Home Phone _____ Business Phone _____

Fax _____

Business Name _____ Address _____

City _____ State _____ Zip _____

E-Mail Address _____

Occupation _____ Education Level _____

Name of last school attended and degree obtained _____

Civic and Community Affiliations _____

Positions Held

I am a dues paid member of PA-TSA: Yes _____ No _____

I can be of service to PA-TSA Inc by:

My relationship to PA-TSA is: Personal _____ Professional _____

If elected I would prefer to serve on the following committees:

Board Development/Nominating _____ Fundraising _____
Legislative _____ Strategic Planning _____ Public Relations _____
Wherever needed _____

If elected I will serve PA-TSA by attending all regularly scheduled board meetings and participating in committee or special meetings to the greatest extent possible.

Signed _____ Degree/Title _____

Submit application to PA-TSA.

Requirements:

- Three-year term of office
- Attendance at meetings as necessary
- Serve on committees as assigned by the President
- Serve as an officer of the Board if elected

** Board membership can be revoked by the Board via the bylaws for non-attendance at regularly scheduled meetings (as defined in the By-Laws).