



Board of Directors Nomination Form

Name of Nominee: _____

Address: _____

Phone: (home) _____ (cell) _____ (work) _____

Occupation: _____

Reason for Nomination: _____

Has the nominee expressed an interest in serving? YES NO

What education or skills could the nominee contribute to AOC's Board of Directors? (Please check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Personnel Management | <input type="checkbox"/> Technical |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Marketing/Public Relations | <input type="checkbox"/> Volunteer Management |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Planning | <input type="checkbox"/> Education |
| <input type="checkbox"/> Government Relations | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Motivation |
| <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Legal | <input type="checkbox"/> Other: please explain |

Nominated by: _____

Date: _____

Please include nominee's Resume if available.

This form along with any accompanying resume must be submitted to:

By Mail:

**AOC Community Media
P.O. Box 5158
Lafayette, LA 70502**

In person:

**AOC Community Media
In the Rosa Parks Transportation Center
101 Jefferson St., Suite 100
Lafayette, LA 70501**