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# Board of Directors Nominee Application Form

*The information you provide is voluntary and will only be used for the purpose of determining an appropriate fit for membership on the Board of Directors of the PlainsWest CASA Program. The information will be shared only with members of the CASA Board of Directors and staff and will be kept in confidence. Statistical and demographic data will be used only in aggregate form.*

**Full Name:**

**Business:** **Home:**

Title: Street:

Organization: City:

Street: State/Zip:

City: Phone:

State/Zip: Email:

Phone: Fax:

Spouse/partner name:

Child/ren name(s):

Which address do you prefer we use? Home Business

Gender: Female Male

Birthday:

## EDUCATIONAL DATA:

School Degree Year

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Are you presently attending school? Yes No If yes, where? Area of study

Do you have any special skills or licenses? Yes No If yes, please explain/describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Current/past occupations:**

**Current/past community or civic involvement:**

**Other affiliations including non-profits, civic, professional, and social organizations:**

**Professional, educational, or personal accomplishments:**

**Area(s) of personal or professional interest:**

**Why are you interested in being a member of the CASA Board of Directors?**

**What do you think you will like best about being a CASA board member?**

**What area of CASA work interests you the most?**

 Administration/management Communications/public relations

 Community Awareness Finances

 Legislation/public policy New program starts

 Personnel Program standards/quality assurance

 Resource Development Strategic planning

 Training/program Other

**What responsibilities are you willing/able to accept as a board member?**

**Do you have family members or friends who are involved with CASA? If so, please list their names and involvement:**

**Any additional information you wish to share?**

**Please check any area(s) of expertise you bring to the board (check all that apply):**

 Judicial Social services

 Government Legal

 Public Relations Law enforcement

 Legislative Financial

 Insurance Business/corporate

 CASA volunteer Medical/therapeutic

 Education Other:

**Ethnic/racial background:**

 African-American Asian/Pacific Islander

 Caucasian Hispanic/Latino

 Multi-racial Native American

 Other

**Please return completed Application to:**

Krista Bruns, Executive Director

PlainsWest CASA

PO Box 647

1021 10Th Ave.

Sidney, NE 69162

(308)203-1120

director@plainswestcasa.org