

Board of Governor's Nomination Form

Nominee's Name:				
Address:	City/ZIP:			
Day Phone:	Cell Phone:	Ema	il:	
Employer:	Position/Title:			
Address:		_City/ZIP:		
Type of Business:				
Relevant Professional an	d Personal Skills:			
This candidate meets the	following criteria:			
Access to Major Do	onorsCurren	at Donor	Escambia/SR Resident	
Politically Engaged	Major	Donor	Active Supporter of PSC	
Access to Business	LeadersEmplo	ys PSC Students	Workforce Development	
Community Advoca	ateNonpr	ofit Advocate	Community Leader	
Spouse/Partner's Name/	Occupation (if applicabl	e):		
Related Program Experie	ence:			
Has Skills and Competer	ncies in the Following A	reas:		
Legal		Fundraisi	Fundraising	
Marketing/Public Relations		Administ	Administration/Business	
Policymaking/Lobbying		Management		
Financial Oversight		Media		
Human Resources		Strategic Planning/Leadership		
Other				

Other Nonprofit (or Board) Experience:	
Other Affiliations:	
Political/Business Connections:	
Known Level of Giving:	
This person would be an asset to the Board because:	
Additional Comments:	
Is the Nominee familiar with the Board of Governor H	Responsibilities? Circle one: Yes/No
Nominated By:	Date:
I have known the Nominee for years	

Please note: Many people are nominated for a few open Board positions. A selection process follows nomination and includes matching nominees with current Board needs.