



## SFSC Alumni Association Board of Directors Nomination Form

### Section I: Nominator Information

\*If self nominating, please skip to section II

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Graduating Year: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to nominee: \_\_\_\_\_

Please contact me at (check all that apply)

- Phone
- Email
- Mail

### Section II: Nominee Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Graduating Year: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_

Please contact he or she at (check all that apply)

- Phone
- Email
- Mail

Nomination for the following position:

- Chair
- Vice Chair
- Secretary
- Board Member

