CANDIDATE QUESTIONNAIRE
OSBA Board of Directors

Name: _______________________________________________  Region: ____________________
District/ESD/CC: ________________________________________  Position #: ____________

I certify that if elected I will faithfully serve as a member of the OSBA Board of Directors. My nomination form
has been submitted to OSBA (or is attached to this document) as evidence.

_________________________________________  ____________________________
Name                                          Date

Be brief; please limit your responses to 50 words per question.

1. Describe in your own words the mission and goals of OSBA.

2. What do you want to accomplish by serving on the OSBA board of directors?

3. What leadership skills do you believe you bring to the board of directors? Give an example of
   a situation in which you demonstrated these skills.

4. What do you see as the two most challenging issues faced by OSBA?
5. What do you see as the two most challenging issues faced by your region?

6. What is your plan for communicating with boards in your region?

Deadline: October 2, 2020, 5 pm

Materials submitted by the candidate on this form may be subject to a public information request under ORS Chapter 192.