

## Application

Name \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

Address \_\_\_\_\_

May we contact you at work?  Yes  No

Work Phone \_\_\_\_\_

District/CC/ESD \_\_\_\_\_

Number of years on local board \_\_\_\_\_

ADM \_\_\_\_\_

Why would you like to be selected for the OSBA Leadership Oregon 2015 program?

*(Additional page may be attached if needed)*

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Are you able to commit top four sessions on the dates listed?  Yes  No

Will you complete the prerequisite courses *Roles & Responsibilities, Public meetings, and Board Governance Through Policy* (available online at [www.osba.org/OLC](http://www.osba.org/OLC)), by January 2015?  Yes  No



Send completed application form to:

**Peggy Holstedt, Director of Board Development and Policy Services at  
pholstedt@osba.org or via fax 503-588-2813**