OSBA Board of Directors CANDIDATE QUESTIONNAIRE

Name:	Date:
Address: City/Zip: Business phone: Residence phone: Cell phone: E-mail: District/ESD/CC:	Insert your high-resolution digital photo (head shot): 1) Open this PDF in Adobe 2) Click on Tools tab 3) Click Edit PDF 4) Click on Add Image 5) Navigate to where photo is 6) Position photo in this frame
Term expires: Years on board: Region:	Position #:
I certify that if elected I will faithfully serve as a member of the OS submitted to OSBA (or is attached to this document) as evidence	•
Name Be brief; please limit your responses	Date 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?
What leadership skills do you believe you bring to the board o you demonstrated these skills.	f directors? Give an example of a situation in which

OSBA Board of Directors

What do you see as the two most challenging issues faced by OSBA?
What do you see as the two most challenging issues faced by your region?
What is your plan for communicating with boards in your region?
Please continue to the next section.

OSBA Board of Directors CANDIDATE PERSONAL/PROFESSIONAL RESUME

Work or service performed for OSBA or local district (include committee name and if you were chair):

Other education board positions held/dates:	
Occupation (Include at least the past five years): Employers: Dates:	
Schools attended (Include official name of school, where and when): High school: College: Degrees earned:	
Education honors and/or awards:	
Other applicable training or education:	
Activities, other state and local community services:	
Hobbies/special interests:	
Business/professional/civic group memberships; offices held and dates:	
Additional comments:	