

PTA LEADERSHIP NOMINATING FORM



Bill Arp Elementary School PTA

I wish to have the Nominating Committee consider the following person for the office of:

- President
- Vice-President of Programs
- Vice-President of Family Engagement
- Secretary
- Treasurer
- Parliamentarian

Name: _____

Address: _____

Telephone: (H) _____ (W) _____

Fax: _____ Email: _____

Describe this person's qualifications for office and fitness to serve. Please attach any other information about this candidate (limit to one page) that may be helpful in assisting the Nominating Committee.

Submitted by: _____

Return To: Tina Harris, Nominating Committee Chair

DEADLINE for submitting this form: **Friday, April 24, 2015**