

Nebraska Arborists Association – Board Application/Nomination Form

PLEASE TYPE OR PRINT CLEARLY

NAME: _____

COMPANY: _____

PREFERRED MAILING ADDRESS:

ADDRESS: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____

WORK PHONE: _____

FAX: _____

E-MAIL: _____

EDUCATION/TRAINING (School, Degree, Field of Study):

MISC. TRAINING (e.g. Arborists School): _____

UNDERGRADUATE: _____

GRADUATE: _____

ADVANCED: _____

CURRENT EMPLOYMENT (PRIMARY FUNCTIONS OR AREAS OF SPECIALTY):

EMPLOYMENT HISTORY:

CURRENT & PREVIOUS NAA ACTIVITIES:

PROFESSIONAL AND COMMUNITY ACTIVITIES, OTHER AFFILIATED MEMBERSHIPS, HONORS & AWARDS:

OTHER (e.g. family, hobbies, etc.)

STATEMENT OF CANDIDACY (To be printed in NAA Newsletter):

What would you like to accomplish through your service on the NAA Board of Directors? What leadership, collaborative skills and experience do you bring to this effort? Etc.

Email photo to staff@nearborists.org

PLEASE RETURN BY NOVEMBER 8TH TO: NAA, 521 First Street, Milford, NE 68405
or by emailing to staff@nearborists.org