DISTRICT DIRECTOR CANDIDATE PROFILE
VOLLEYBALL DIVISION

Please complete and return this Profile Information to TASO Volleyball Division
Mail: 1221 West Campbell Road Suite 141 Richardson, Texas 75080
E-mail: volleyball@taso.org
Fax: 214-390-5252
Your Profile must be submitted by October 1st.

If you do not receive a confirmation of receipt within 2 days, please call 214-390-2895 ext 1002.

Date: _____ **Chapter:** _____

Name: _____ _____
FIRST LAST

Occupation: _____

Please list boards and committees that you currently serve or have served on (business, civic, community, fraternal, political, professional, recreational, religious, etc)

Organization	Role/Title	Dates of Service

Education/Training Certificates

Have you received any awards or honors that you would like to mention? *OPTIONAL*

How do you feel TASO Volleyball would benefit from you as a Board Member?

Skills, experience and interests (Please check all that apply)

- ☐ Finance, accounting
- ☐ Personnel, human resources
- ☐ Administration, management
- ☐ Nonprofit experience
- ☐ Community service
- ☐ Policy development
- ☐ Program evaluation
- ☐ Public Relations, communications
- ☐ Education, training, instruction
- ☐ Special Events
- ☐ Outreach, advocacy
- ☐ Other _____
- ☐ Other _____
- ☐ Other _____

Please detail your vision of how you will contribute to TASO Volleyball

Thank you for your interest in serving TASO Volleyball