



The WIC Association of NYS, Inc. Board Nomination Form

Date of Nomination:		Sponsor of Recommended Candidate (<i>who is nominating?</i>) :	
How do you know the prospect?		Does the prospect know that you have submitted his/her name? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Why have you chosen to recommend this person for the WIC Association of NYS Board of Directors?	
Prospective Board Member Information			
Candidate Name		What areas of expertise do you feel this candidate can contribute to the WIC Association Board?	
Agency/Organization		<input type="checkbox"/> Finance	<input type="checkbox"/> Marketing
Street Address		<input type="checkbox"/> Fundraising	<input type="checkbox"/> Technology
City		<input type="checkbox"/> Nutrition/BF	<input type="checkbox"/> Advocacy/Lobbying
Zip		<input type="checkbox"/> Human Resources	<input type="checkbox"/> Media
Phone		<input type="checkbox"/> Legal	<input type="checkbox"/> Social media
Fax		<input type="checkbox"/> Parliamentary process	<input type="checkbox"/> Conference planning
Email		<input type="checkbox"/> Website mgmt.	<input type="checkbox"/> Other (specify)
Additional Comments			
Board of Directors Use			
BOD rec'd form		Notes/Comments:	
Nominating Comm. Reviewed			
Application Sent <input type="checkbox"/> Application <input type="checkbox"/> Job Description <input type="checkbox"/> Welcome Letter			
Application Rec'd			
Nominating Comm. Reviewed Application			
Name Shared w/BOD			
Interview Date			
Date Rec. to full BOD			
d/c Process-Explain in Notes <input type="checkbox"/> Sent courtesy letter			

Please submit nomination form to:

WIC Association of NYS, Inc.

Email: wicassociationofnys@gmail.com

Cell: 518-410-0621