

Notice of Intent Form Candidates for ASNA Board of Directors

Please check the appropriate statements:
Yes, I am pleased to be considered for the office of
Second Choice:
No thank you, I decline to have my name considered for office at this time.
Nomination Criteria Checklist for Board of Directors
 I have the consent and support of my employer to be considered for this office I have not served in the ASNA Board of Directors position previously. My Biographical Information My two letters of recommendation Letters must be from ASNA Current President or a current or former ASNA Board member, ASNA Past President Letters must address candidates' leadership experience and skills and contributions candidate can make to state representation of school nutrition professionals. My goals for the office(s) are on the Biographical Information Form. A professional quality portrait photo; digital phot sent by email preferred
Name
Signature
Data