



SkillsUSA Idaho Application Form to become a Member of the Board of Directors

In order for the current Board of Directors to fill vacant positions, please provide information to be taken into consideration during elections. This form should be submitted to the State Director and/or Board Chairman.

Name: _____

Position: _____

School/Company Name: _____

School/Company Address: _____

Phone Number: _____

Email Address: _____

Number of Years Associated with SkillsUSA: _____

Are you willing/available to participate in monthly meetings (via teleconference with exception of State Leadership and Skills Conference)? **Yes** **No**

Please attach a short biography or résumé to this application that includes the following information:

- Why do you want to join the Board of Directors?
- Why would you be a good addition to the Board of Directors?
- What experiences have you had with SkillsUSA?

Signature (Electronic Signature Accepted)

Date