



# ASBA Officer Declaration of Intent Form

*This form should be completed and sent to the ASBA President, with a copy to the ASBA Executive Director, to the address at the bottom of this form at least 30 days before the Annual Meeting of the Delegate Assembly.*

Nominee's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ Email \_\_\_\_\_

# Years School Board Service \_\_\_\_\_ School District \_\_\_\_\_

Year elected for current term \_\_\_\_\_ Length of term \_\_\_\_\_ Term ends \_\_\_\_\_

# ASBA Hours of school board member training attained \_\_\_\_\_

Check all that apply:

Honor Board Member  Outstanding Board Member  Master Board Member  Pinnacle Award Member

Certificate of Boardsmanship  Platinum Award Member  President's Award Member

Description of board service and leadership:

## **Nomination Certification:**

Members of the \_\_\_\_\_ Board of Education voted in the affirmative at a regular/special meeting on \_\_\_\_\_ 20\_\_\_\_\_ to nominate

\_\_\_\_\_ for the position of \_\_\_\_\_

on the ASBA Board. This nominee has \_\_\_\_\_ years remaining in his/her term on our board.

Superintendent \_\_\_\_\_ Board President \_\_\_\_\_

Board Secretary \_\_\_\_\_