

Board of Directors Nominee Application Form

The information you provide is voluntary and will only be used for the purpose of determining an appropriate fit for membership on the Board of Directors PTI Nebraska. The information will be shared only with members of the PTI Nebraska Board of Directors and staff and will be kept in confidence. Statistical and demographic data will be used only in aggregate form.

Full name:	
Home Address	Business Address
Street	Title
City	Organization
StateZip	Street
Phone Number	City
Cellular Number	State Zip
Email Address	Phone Number
	Fax Number
	Email Address
	: (check your preference): Home Business
Preferred telephone numb	er (check your preference): Home Business _
Spouse/partner name:	
Child/ren's name(s):	
Pet(s) name(s):	
How would you (or you and	d your spouse/partner) like to be addressed on
correspondence (Dr., Mr.,	Mrs., Ms., etc.)?

Current/past occupations:			
Current/past community or civic involvement:			
Other affiliations including non-profits, civic, professional, and social organizations:			
Professional, educational or personal accomplishments:			
Area(s) of personal or professional interest:			
Why are you interested in being a member of the PTI Nebraska Board of Directors?			
What do you think you would like best about being a PTI Nebraska board member?			

What area of PTI Nebraska w	ork interests you the most?		
Fundraising/special events	Marketing/public relations		
Community awareness	Finances		
Legislation/public policy	New program starts		
Personnel	Program standards/quality assurance		
Resource development	Strategic planning		
Training/program	Other		
Speaker's bureau			
	or friends who are involved with PTI eir names and involvement (if appropriate):		
Any additional information yo	ou wish to share?		

*****Demographic Information (optional)****

Educational background School	Degree	Year	
Gender: Female Male	_		
Age:			
16-19 20-29 30-39	40-4950-596	50-69 70+	
Please check any area(s) of	expertise you bring to	the board (check all that	
apply): Judicial	Social services _		
Government	Legal		
Public relations	Special Educatio	n	
Legislative	Financial	_	
Family Member/Parent	Business/corpor	ate	
PTI volunteer	Medical/therapeutic		
Disability Advocate	Education	_	
Other			
Ethnic/racial background: African-American	Asian/Pacific Isl	ander	
Caucasian	•	Hispanic/Latino	
Multi-racial	Native American		
Other			

Please return completed application to:

Mike Tufte - Executive Director

PTI Nebraska 1941 S. 42nd St, Ste. 205 Omaha, NE 68105 Phone: 402.403.3918

Toll free: 800.284-8520 Fax: 402.934.1479

Email: mtufte@pti-nebraska.org