



ALUMNI ASSOCIATION

# Board of Directors Nomination Form

## – Due March 1

### Nominee Contact Information

Nominee Name	
Street Address	
City, State Zip Code	
Home Phone	
E-mail Address	
Occupation	
Business Name and Address	
Work Phone	

### Degree Information

CSU year of graduation	
College	
Degree	
Non-CSU degree (university and graduation year)	

### Skills and Qualifications

Why would your nominee make a good Alumni Association board member?

Describe your nominee's professional, civic, or organizational leadership experience.

Describe your nominee's involvement with Colorado State University and/or the Alumni Association (e.g. event attendance, volunteer service, philanthropic support, etc.)

Describe any additional skills/talents your nominee would bring to service on the board.

**Nominator Contact Information**

Nominator Name	
Street Address	
City, State Zip Code	
Home Phone	
E-mail Address	

Other information about your nominee (resume, letter of support, etc.) is encouraged.

Please return this form and any accompanying materials *by March 1* to:

Colorado State University Alumni Association  
7114 Campus Delivery  
Fort Collins, CO 80523-7114

Nomination materials can be faxed to (970) 491-0798  
For information, call (970) 491-6533 or (800) 286-2586

It is the policy of Colorado State University and the Alumni Association to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest.