



Autism Society of Nebraska
Application form for person interested in serving as a board member

Name _____ Phone _____

Address _____

Relevant Experience and/or Employment (attach a resume if relevant) _____

Why are you interested in our organization? _____

Area(s) of expertise/Contribution you feel you can make _____

Other volunteer commitments _____

PLEASE REMIT FORM TO:
Autism Society of Nebraska
PO BOX 83559
Lincoln, NE 68501-3559

Or email to:
autismsociety@autismnebraska.org

=====

For Board Use

___ Nominee has had a personal meeting with a board member. _____ Date _____

___ Nominee reviewed by the committee. Date _____

___ Nominee attended a board meeting. Date _____

___ Nominee interviewed by the board. Date _____

Action taken by the board _____