

**Hawaii State PTSA Nomination & Application Form**

One of our goals is to fill our open positions at the Hawaii State PTSA, so that as an organization, we can live up to our potential. There are many opportunities to help out. Please take the time to complete this form for yourself or for someone who you think would make a great leader. Rest assured the information you provide will be held in strict confidence and used only for PTSA/PTA business.

# Name of Nominee:

**Position Sought**:

**CONTACT INFORMATION:**

**Email**:

**Phone Number**:

***Please provide names and contact information for three references that can attest to your abilities and background:***

# Reference #1

Name:

Day Phone: Evening Phone: E-mail:

# Reference #2

Name:

Day Phone: Evening Phone: E-mail:

# Reference #3

Name:

Day Phone: Evening Phone: E-mail:

**PLEASE ANSWER THE FOLLOWING QUESTIONS. (You may use a separate piece of paper.)**

1. **Please provide prior workplace or PTA experience applicable to the position sought (position/title, dates, employer/PTA/PTSA):**
2. **Please provide a brief statement about why you wish to volunteer your leadership skills to the Hawaii State PTSA?**
3. **What are the strengths (experience, relationships, skills) that you bring to the position you are seeking?**
4. **Joining a board requires working as part of a team. How would you describe your ability to work on a team? What role do you think you will play as part of this team?**

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM.**

**PLEASE RETURN FORM TO:**

**Hawaii State PTSA - PO Box 459, Pearl City, HI 96782**

**Or by email at: histateptsa@gmail.com**