

NOMINATION FORM BOARD OF DIRECTORS/ BOARD DEVELOPMENT COMMITTEE GIRL SCOUTS OF GREATER MISSISSIPPI



Please use this form to refer prospective candidates for positions on the Girl Scouts of Greater Mississippi Board of Directors or Board Development Committee. Prospects shall be selected so that the Board of Directors and Board Development Committee represents a diverse population groups and can bring to its deliberations a variety of points of view, skills and experience, as well as access to economic resources.

Prospects for the Council Board and the Board Development Committee must meet the following criteria:

- 1. Accept the principles, beliefs, and purpose of Girl Scouting.
- 2. Understand cultural, social, and economic trends nationally and internationally and their effect on Girl Scouting and its activities.
- 3. Be available to attend board and committee meetings as set forth by the members.
- 4. Be a minimum of 18 years of age at the time of election.
- 5. Be willing to make a financial contribution to the council and/or solicit significant gifts.

Prospects not selected for board membership may also be referred for task group appointments or other leadership positions.

PLEASE TYPE OR PRINT CLEARLY. Please complete the biographical information requested below and attach a résumé of your nominee, if possible. *NOTE: Please do not communicate to prospect that they are being considered*.

Send completed form to:

Board Development Committee Girl Scouts of Greater Mississippi 1471 West County Line Road Jackson, MS 39213 Email: <u>governance@gsgms.org</u>

Mark envelope CONFIDENTIAL

Name of Prospect				
Home Address				
City	State	Zip		Phone
Occupation		Title		
Name of Business				
Business Address				
City	State	Zip		Phone
Nature of Business				
Citizenship		E-mail address:		
Recommended for				
□Board of Directors	□Board Development Committee		Either Board of Directors or Board Development	

Briefly describe this prospect's area of competency, highlighting no more than three areas of greatest strength. 1.

2.						
3.						
If applicable, please des	cribe this prospe	ct's Girl Scout experience	and participation,	both current and		
past.						
Please describe this pros	spect's sphere of	finfluence.				
Local	itate 🗌	National 🗌	International [
		information summarizir <i>lo not communicate wit</i>				
Referred by (Please pri	nt name)	Signature	Date			
		olonataro	Duto			
Day-time phone		Evening Phone	E-ma	il		
Address						
City		State	Zip			
,						
		g either face-to-face or				
□ Face to Face	Conference	Dur nominee on at a spe	· -	neeting date TBD?		
□ Face to Face □Conference Call □No Meeting Necessary What is your Position in Girl Scouting, if any?						
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