

**MAY WATTS PTA OFFICER NOMINATION FORM
2019-2020**

Nominee Information:

Name: _____

Address: _____

Phone (Day): _____ Evening: _____

Email: _____

Position (can be blank if to be considered for any position) _____

To assist the nominating committee in selecting the best candidate for each position, please provide information regarding nominee's experience in PTA or other organizations. Additional pages may be used or attached.

Nominated By:

Name: _____

Address: _____

Phone (Day): _____ Evening: _____

Email: _____

Please contact Kim Tracy : kimparrillo@hotmail.com if you have any questions. Thank you!