

Board of Directors Application Form

Please send completed form and any accompanying information to

Immediate Past President, Tom Osip - Thanks!!

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| **Nominee:** |  |  | **Class:** |  |
| **Home Address:** |  |  | **Home Tel.:** |  |
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| **Bus. Address:** |  |  | **Business Tel.:** |  |
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| **Company** |  |  | **Position/Title:** |  |

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| **Will your company support your attendance at 3 board meetings and our major event (PackExpo Reception or Packaging Management Conference) each year? Yes or No. If no, please explain.** |  |

1. Do you understand that a MSUPAA board member must attend 2 of the 3 annual meetings minimally otherwise you could be removed from position? Y N
2. Are you involved with other outside organizations? If yes, please explain.
3. Please provide 1-3 sentences on why you want to be on the MSUPAA Board of Director and how you will make an impact if you are elected:

**Describe Volunteer Service to MSU and/or the School of Packaging:**

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**Special Honors/Recognition:**

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**Additional Comments (Please provide current bio / resume if available)**

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**(Please attach additional sheet if more space is needed.)**

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