National Governing Board Nomination Form
2020-2022

NOMINEE INFORMATION:
Please select the position you are applying for:
- National President-Elect
- National Treasurer-Elect
- Director (At-Large)
- Director (for Chapters) Areas 1-8 (this position accepting nominations beginning in January 2020; choose area and confirm that you are your chapters NCC rep for 2020-21)

Nominee Name (First Middle Last):
Chapter:
Email Address:
Address (Street, City, State, and Zip)
Telephone:

WORK EXPERIENCE:
Current Title:
Current Employer:
Do you have support from your employer to seek an AGA elected director position?
Upload Resume

AGA EXPERIENCE:
Please answer the following questions in 2,500 characters or less.

* AGA Chapter-Level Offices Held (Please list office, dates held and describe accomplishments)
* AGA Regional/National-Level Offices Held (Please list office, dates held and describe accomplishments)
* Other AGA-Related Activities/Service (Please list any AGA-related activities/service other than those referenced above that you have participated in and describe accomplishments.)

OTHER LEADERSHIP EXPERIENCE/BIO:
Please answer the following questions in 2,500 characters or less.

* List other professional leadership activities/organizations you have participated in and describe accomplishments.
* Each nomination must contain a short biographical sketch in paragraph form.

NOMINATION QUESTIONS:
Please answer the following questions in 2,000 characters or less.

1. What makes AGA and our mission meaningful for you?
2. What is your vision for the future of AGA? What challenges exist in AGA that need to be addressed?
3. How would you describe your leadership style? Provide examples of your leadership ability or experience (where you've moved the dial, shifted mindsets, and influenced decisions).
4. Please review the job description for the position you are applying for. What is your ability to serve? Will there be any time constraints? Will you be able to travel [ex. NGB in-person meetings (e.g. July, September and February in concert with National Events), two-day LEAD training in spring, potential visits to chapters]?
5. How do you envision fulfilling the role of active advocate and ambassador for AGA?

CONFLICT OF INTEREST POLICY AND DISCLOSURE FORM:
I have read the AGA Conflict of Interest Policy and agree to comply fully with its terms and conditions at all times during my service as an AGA NGB Member. If at any time following the submission of this form, I become aware of any actual or potential conflicts of interest, or if the information provided below becomes inaccurate or incomplete, I will promptly notify the AGA Chief Executive Officer in writing.

* I agree to comply with the statement above.
* Full Name
* Title
* Today’s Date