

Alumni Board Nomination form

The Erskine College and Theological Seminary Alumni Association invites you to submit nominations for the Alumni Association Board of Directors. Please submit the name of the individual who you would like to nominate, as well as the individual’s contact details. Members of the Nominating Committee will review all nominees and will present a final slate to the assembled Alumni Association at the annual Alumni Day meeting.

**Nominee Name (Title, First, Last**):  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Home City:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact Phone:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email Address : **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Occupation:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Erskine Class Year:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Degree(s):  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Nominated by**:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Erskine Class Year:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email Address:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Contact Phone:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please describe in a narrative form why this nominee should be considered for the alumni board focusing on Erskine-related activities as well as local service for which he or she should be recognized. Please include community leadership positions, offices held, dates, etc. References or supporting materials may also be provided/attached.

**Mail to by the first week in January:** Erskine College Alumni Office, PO Box 338, Due West, SC 29639. For more information, please call the Alumni Office at 864-379-8772.