



BOARD CANDIDATE APPLICATION FORM

Date: _____

Name: _____ Title: _____

Company Name: _____

Company Address: _____ City/State: _____ Zip Code: _____

Office Phone: _____ Cell Phone: _____

E-mail Address: _____ Fax: _____

Referral Made By: _____

Years in Industry: _____ Years with Current Employer: _____

Current Job Responsibilities:

List Previous Employment: _____

List Previous and Current Industry Organizations and Position Held/Awards Received: _____

Other Professional Organizations/Achievements/Awards: _____

Industry Segment Represented:

- Collision Repair
- Tool, Equipment & Sales
- Education & Training
- Insurance
- Related Industry Services
- Vehicle Manufacturer (OEM)
- Other _____

Areas of Experience/Expertise:

- Finance
- Marketing
- Board Governance
- Strategic Planning
- Fundraising
- Web Site
- Education and Training
- Scholarships
- Publications
- Conference Coordinator

Education:

- Associate's Degree
- Bachelor's Degree
- Master's Degree
- Ph.D/JD Degree
- Technical School or College
- Other

What do you feel you could bring to WIN?

IF SELECTED I WILL AGREE TO SIGN A CONFIDENTIALITY AGREEMENT AND A CONFLICT OF INTEREST DISCLOSURE FORM. YES NO

I VERIFY THAT THE ABOVE INFORMATION WITH REGARD TO MY BIOGRAPHICAL DATA AND QUALIFICATIONS IS TRUE AND CORRECT.

Signature

Date