

**PLATTSBURGH ALUMNI ASSOCIATION
BOARD OF DIRECTORS' NOMINATION FORM**

NOMINEE INFORMATION:

NAME: _____ CLASS YEAR: _____

DEGREE/ MAJOR: _____ CURRENT OCCUPATION/ POSITION: _____

HOME PHONE: () _____ - _____ WORK PHONE: () _____ - _____

EMAIL: _____

HOME ADDRESS: _____

Please describe the nominee's involvement/service to the college as a student:

Please describe the nominee's support and service to the college as an alumna/alumnus:

Please describe any special qualities or talents that make the nominee stand out as a potential board member:

In addition to this application, you are welcome to attach up to three letters of recommendation.

NOMINATOR INFORMATION (IF NOT SELF-NOMINATED):

NAME: _____ CLASS YEAR: _____

EMAIL: _____ PHONE: () _____ - _____

Thank you for your submission. All applications will be reviewed annually. Nomination is not a guarantee of selection.

**Please return completed form to:
Office of Alumni Relations, SUNY Plattsburgh, 113 Hawkins Hall, 101 Broad Street, Plattsburgh, N.Y. 12901**