

**Kansas TSA Inc. Board of Directors Nominee Form
Board Chairman and Board Representative Positions**

**BY SIGNING THIS FORM, THE NOMINEE ACCEPTS THE TERM IN OFFICE AND
THE DUTIES OF ADVISORY COUNCIL ELECTED POSITIONS.**

Please indicate which Advisory Council Elected Position for which you have interest:

Board Chairman

Board Representative

Signature _____

Date _____

Name _____

Chapter _____

Place of employment _____

City _____

Work e-mail _____

Work # _____

Alternate email _____

Cell _____

Please state briefly:

Why you chose to be involved with TSA

Non TSA commitments or obligations that might be pertinent

TSA Specific Recognition and/or Contributions Professional Recognition