



# NOMINATIONS COMMITTEE

## BOARD OF DIRECTORS CANDIDATE QUESTIONNAIRE

This questionnaire is designed to summarize the qualifications for nomination candidate consideration for the NPELRA Board of Directors. Please complete the following information. If needed, you may add pages to expand your answers. Thank you for your interest in serving the National Public Employer Labor Relations Association.

### 1. Background Information

_____	_____	_____
(Name)	(Title)	(Agency/Employer)
_____	_____	_____
(Agency/Employer Address)	(City, ST)	(Zip)
_____	_____	_____
(Agency/Employer Phone)	(Home Phone)	(Years in Current Position)
_____	_____	
(Fax Number)	(Work-Email Address)	

### 2. NPELRA/PELRA Information

(a) How long have you been a member of NPELRA? \_\_\_\_\_ Years

(b) Do you belong to a State PELRA? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, name of PELRA \_\_\_\_\_

(c) How long have you been a member of State PELRA? \_\_\_\_\_ Years

(d) Have you been a member of a State PELRA Board of Directors?

\_\_\_\_\_ Yes \_\_\_\_\_ No If Yes, how long? \_\_\_\_\_ Years

What position(s) or office(s) did you serve on the state board?

\_\_\_\_\_

\_\_\_\_\_

### 3. Commitment

Please attach a letter explaining why you wish to serve on NPELRA Board of Directors.

4. **Abilities/Experience**

What particular professional skills, knowledge, abilities, and experience would you provide as a member of the Board of Directors? \_\_\_\_\_

---

---

---

5. **Prior NPELRA/PELRA Activities/Services**

What NPELRA or state PELRA activities, services, or assignments have you previously been involved with (Program, Membership, Training, etc.)?

---

---

---

6. If you were selected for the Board, what three goals would you establish for NPELRA during your term?

- (a) \_\_\_\_\_
- (b) \_\_\_\_\_
- (c) \_\_\_\_\_

7. **Availability/Support Services**

Participation as an NPELRA Board Member may be time consuming; therefore, it is critical that your employer supports your involvement with NPELRA. However, your employer's financial support for NPELRA service is not a criterion for selection to the Board of Directors.

- (a) Will your agency/employer allow you time off to travel for Board meetings or special assignments? \_\_\_\_\_ Yes \_\_\_\_\_ No
- (b) Will your agency/employer provide or assist in your travel expenses? \_\_\_\_\_ Yes \_\_\_\_\_ No
- (c) Can your agency/employer provide or assist in expenses for printing, phones, postage, etc. related to your NPELRA Board assignments? \_\_\_\_\_ Yes \_\_\_\_\_ No

8. **References**

Please list at least three professional references (preferably from NPELRA or state PELRAs) who can attest to your professional qualifications for candidacy to the NPELRA Board.

(a) Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

(b) Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

(c) Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

9. **Additional Information**

If there is any additional information you would like to submit in support of your candidacy, please note it here.

---

---

---

---

---

---

---

---

10. **Resume/Biography**

Please attach a copy of your résumé or a biographical summary.

11. **Date of Application**

---

You may submit your application to the NPELRA Nominations Committee no later than **Monday, March 1, 2010.**

*Thank You ~*

The NPELRA Nominations Committee:

**Jim Richter, Chair, WI** (jrichter@waukeshacounty.gov)