



Nominee Information Sheet

The information you provide here will be printed on the nomination ballot for the board members in each region. The information you share will help other members in your region select the candidate they feel will best represent their region on the Illinois After-school Network (IAN) Board.

Please include a short bio with this form.

PLEASE E-mail or FAX to IAN
Illinois AfterSchool Network (IAN)
3695 S. 6th Street, Suite N800
Springfield, IL 62703

E-mail: ianetwrk@att.net

Fax Number: 217-585-1530

Name: _____

Business/Employer Name: _____

Title/Position: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

e-mail: _____

Fax: _____

Cell phone: (optional) _____

Number of years in the field of Out of School / Afterschool: _____

Discuss your philosophy of Out of school/Afterschool time: _____

Why would you like to be a member of the IAN Board of directors? _____

What relevant experience and skills, including professional experience and service on other boards, would you bring to the IAN Board of Directors? _____

What contributions do you think you can make to the Board of IAN? _____
