

JOFFORSON COUNTY ASSOCIATION for gift Q d C hild r Q N

2023 Nomination for Board of Directors

Please download and email this application to the Chair of the Nomination Committee no later than April 1, 2023

Applicant Information	
Name:	_
Occupation:	
Address:	
Phone:	
Email:	
During the nomination window, my contact preference is: ☐ Phone ☐ Email	
The best time to reach me is:	
Are you a GT Parent? ☐ Yes ☐ No	
Does your child(ren) attend Jeffco Public Schools? ☐ Yes ☐ No What school(s) does your child(ren) attend? ☐ The school of the s	_
Are you not a current Jeffco parent, but a passionate Community Member? Yes N	0
Are you a Jeffco Public Schools Staff Member? Yes No If so, what position and where?	
Are you currently a Member of JAGC? Yes No If yes, for how long?	
Please describe your past and current involvement in the JAGC:	

Why do you want to become a JAGC Board Director? (Your answer will help the nominating committee choose the best candidates. Your response could be published for the ballot.)	
Oth	er leadership or community volunteer efforts:
	se list, in priority, the positions for which you would like to apply.
3:_	
Mem	Jefferson County Association for Gifted Children requires that all Board Members be JAGC bers and have the ability to attend monthly board meetings and serve as needed.
	Understand that this is a volunteer (not paid) position Agree to pay my membership dues by close of nominations and agree to meet the terms of membership requirements
	Understand that this elected position is a two-year term Will represent the community served by JAGC, according to its bylaws Have an interest in and the ability to assist JAGC in developing activities Will be able to participate in monthly meetings and special activities
	Support the mission and values of JAGC Am able to participate effectively in fulfilling the responsibilities of my elected position Have read and understand the roles and responsibilities of my desired board position and if elected will abide by those directives.
Sign	atuwo:

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