



POTENTIAL LEADER REFERRAL FORM

Purpose: Use this form to help the Delaware PTA identify potential state board members.

Instructions:

- Make copies of this form as needed.
- Fill in the information requested below. Please print clearly.
- Mail completed form to Delaware PTA 925 Rear-Corbitt Rd. Room 101, Bear, DE 19701-1323

Date	Local PTA Unit	
_ocal Unit ID #	Region	Council
Submitted by:		Position
Address		
City	State	Zip Code
Phone		
	INFORMATION ON IN	DIVIDUAL REFERRED
WOOD AND THE PROPERTY OF THE P		
Affiliation (local unit PTA, busine	ss, college, etc.)	
Daytime Phone	Evening Phone	E-Mail
Areas of interest or strengths ob	served:	
□leadership/professional development		□legislative/advocacy
☐finance/business expertise		□parent involvement
□public speaking/presentation skills		☐membership/recruitment
☐marketing/advertising/communication		□knowledge of special populations
□content knowledge		□other
Please comment so we might	better understand this pe	rson's skills or strengths.
And the second control of the second control		
	A STATE OF THE STA	
Was this individual identified	by you or someone else, o	or were they self-identified? (i.e., who brought this
person to your attention?)		
or professional organization med	etings, cable tv message bo munity centers or college (ood newspaper volunteer listings, volunteer fairs, community pards, employer company newsletters, human interest stories campus bulletin boards, church bulletins, local events fairs, arse, your local PTA unit.
Thank you for	your help in identifying po	ossible new Delaware PTA board members.
	FOR OFFIC	CE USE ONLY
Date Received	***	
Forwarded to the Nominating and Leade	ership Development Committee	