



Potlatch Fund

BOARD OF DIRECTORS NOMINATION FORM

The information provided will be used by the Board of Directors to select the best qualified individual(s) to serve as board members.

Submitted by: Self Nomination Name: _____

(If this is a self-nomination please include letter of reference in your submission, if this is not a self-nomination the complete nomination form will be considered a reference)

Nominee Name: _____

Mailing Address: _____ City: _____

State: _____ Zip/Postal: _____ County: _____

Phone: _____ Email: _____

Qualifications

Board Member(s) to be appointed will have the desired skills and attributes: *(please select all that apply)*

1. Which of the following service area do you represent? OR MT WA ID Other

2. List American Indian or Alaskan Native Tribe(s) you are enrolled and/or descended from?

3. Please check any of the following skills or experience that the nominee possesses in Native Community?

Leadership Experience Professional Experience Diverse Native Communities Grantmaking

2-Spirit Youth Development Economic Development Fundraising Public Relations

Community Development Non-Profit Sector Philanthropic Sector Culture Language

Finance/Accounting Indian Law LGBTQ 2-Spirit Multi-cultural Afro-Native Asian-Native
 Latin-Native -Native

4. Briefly describe how the nominee would be a valuable member of our Board of Directors. Include professional experience and/or ways that the nominee can help strengthen the work of Potlatch Fund and what assets the nominee will bring to the Board.