

NASW Montana Committee Application

Note: You must be a current NASW member to serve on a NASW MT Committee. All committee members are appointed by the President of the NASW MT Board of Directors

Committee Position you are applying for:

Nominations and Leadership Committee

Social Action and Policy Committee

Continuing Education Committee

PACE Committee

Membership Committee

Clinical Supervision Task Force

Candidate Information

Name _____

Home address _____

City, State, Zip _____

Home Phone _____

Cell Phone _____

Home Email _____

Employer _____

Job Title _____

Work Address _____

City, State, Zip _____

Work Email _____

Home Email _____

Fax _____

Supervisor, Work Phone _____

References: Name of Three References

Name, Address and Phone Number

- 1.
- 2.
- 3.

What other boards/committees have you served on? _____

Charitable or community activities in which you have been involved: _____

Do you have experience speaking to the media? Yes No
If yes, can you tell us when you had the opportunity(ies) to do so?

Do you have any experience communicating to public elected officials? Yes No
If yes, can you tell us when had the opportunity(ies) to do so?

Have you ever or do you have pending: Adjudication for unethical practice? Yes No
Licensure or certificate disciplinary proceedings? Yes No

If "Yes" please explain and provide dates. _____

Signed:

Member _____ Date _____

President Board of Directors _____ Date _____