



Board of Directors **Nomination Form**

Please provide the requested information below. Once completed, return to The 501 Alliance at the address at the bottom of this form (**attn: Administrator**), **with a copy of your resume**. To qualify, you must be a resident of the state of Michigan. The Administrator will contact you after receipt of your completed form.

Nominee: (Mr./Mrs./Ms./Dr.) _____

Title: _____

Company Name: _____

Company Address: _____

Company Phone #: _____

E-mail Address: _____

Company County: _____

Home Address: _____

Home/Cell Phone #: _____

Additional Comments: _____

Director expectations:

1. Attend four meetings per year in Lansing that last approximately two hours each.
2. Participate on at least one committee that reviews information, offers input and provides recommendations to the full Board.
3. Participate on committee conference calls as required.
4. Promote The 501 Alliance unemployment program and encourage nonprofit organizations to become members.