Board Nomination Form

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| --- | --- | --- | --- | --- | --- |
| **Your Name:** |  | | **Your IIBA Member #:** | |  |
| **Nominee’s Name:** |  | | **Nominee’s IIBA Member #:** | |  |
| **Position Desired:** | President | VP Marketing | | VP Membership | |
| VP Operations | VP Finance | | VP Professional Development | |
| **Nominee Biography:** |  | | | | |

Please complete this form and send to [election@central-indiana.iiba.org](mailto:election@central-indiana.iiba.org)