

**Presidential Search Committee
Committee Nomination Form**

Name: _____

Title: _____

Business Phone: _____ Home Phone: _____

E-mail: _____ Cell Number: _____

Position or Relationship to College: (check one or more as appropriate)

- | | | |
|---|--|--|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Alumna/ae | <input type="checkbox"/> Faculty |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Student | <input type="checkbox"/> Support Staff |
| <input type="checkbox"/> Trustee Emeritus | <input type="checkbox"/> Community (Please Specify): | |

Gender: _____ Ethnicity: _____

Years of Service to Blinn College: _____

Nature of relationship to Blinn College, (if not internal, i.e., employee, student, foundation member, or trustee emeritus):

- | | | |
|-----------------------------------|---|--|
| <input type="checkbox"/> Employee | <input type="checkbox"/> Student | <input type="checkbox"/> Foundation Member |
| <input type="checkbox"/> Trustee | <input type="checkbox"/> Former Trustee | <input type="checkbox"/> Community Member |

What value will the individual nominated add to the process **OR** how has this individual demonstrated an interest in Blinn College?

Please return to **Becky Krebs** by **January 23, 2015**
Office of District President, 902 College Avenue, Brenham, TX 77833
bkrebs@blinn.edu