

Candidate for Board of Directors Membership

*Area Agency on Aging of Pasco-Pinellas, Inc.
9549 Koger Blvd., Ste. 100
St. Petersburg, FL 33702*

AGENDA ITEM #9A
5/20/2024

Name

Home Address

Home Telephone

Home Fax

Cell Phone

County of Residence

Business Address

Bus. Telephone

Bus. Fax

County of Business

E-Mail Address

Occupation

Title

Age **Birthdate** **Sex:** Male Female

Race/Ethnicity White African American Asian Hispanic American Indian Other

Description of Present Employment (if applicable)

Education and/or Training

Boards/Advisory Councils You Serve On

Volunteer Experience

Talents/Hobbies/Skills

Please explain experience and/or interest in aging

Referred by: _____

Date: _____

*Feel free to include a resume in addition to completion of this form
Please note that a Background Screening will be done on all candidates.*