



Board of Directors Self-Nomination Form

Your Name: _____

Address: _____

City: _____ Zip: _____ Home Phone: _____

Work or Cell Phone: _____ E-Mail: _____

Are you a:

- Parent of Student Alumni Student
- Parent of past Student Community Member PHS Teacher/Administrator/Coach

Children at Poway High this coming Fall semester and grade level: _____

Occupation: _____ Company Name: _____

What is your primary interest in serving on the Poway High Foundation board?

What specific qualifications, skills and expertise do you bring to the Board?

Is there an area or position that interests you? _____

Have you served on a board before, if so, please indicate ones you are serving or have served and positions held: _____

Please attach a resume if you have one.

Please Mail form to: Poway High Foundation, 15500 Espola Road, Poway, CA 92064