

ALUMNI BOARD APPLICATION				
PERSONAL				
Name:				
Date of Birth:		Ma	le or	Female
Home Address:				
Home Phone:	Bus. Phone:		Cell Phone:	
Email Address:		Alternate Email	:	
Graduation Year:	Degree:		Major:	
EMPLOYMENT INFORMATION				
Company Name:				
Business Address:				
Title:				
ORGANIZATIONS/ACTIVITES IN WHICH YOU ARE ACTIVELY ENGAGED:				
QUALIFICATIONS:				
MEMBERSHIP DUES and RESPONSIBILITES:				
Membership Dues: Alumni Board members will be assessed annual board dues of \$100 to support the operations of the Alumni Association.				
 Responsibilities: To the extent possible, participate in the Association's programs and activities. Suggest possible nominees to the Board who are clearly individuals of achievement and accomplishment, and who can make significant contributions to the Association's progress. Serve in leadership positions or undertake special assignments willingly and enthusiastically when asked. Maintain membership in the Association and be supportive of other ASU related foundations. Prepare for and participate in quarterly Board meetings. Read and understand the Association's Constitution and Bylaws. 				
SIGNATURE				
Signature of applicant:			Date:	
Return this signed application with a bi	rief bio or resu	me by fax to 256	-233-8189, emai	I to trish.dilullo@athens.edu

or mail to: Athens State University, Alumni Association, 300 N Beaty Street, Athens, AL 35611.