

Brief Professional Biography Form

Name: _____

Title: _____

School District: _____

Board Position nominated for: _____

Number of years you have been a TASN Member: _____

Number of years you have been a SNA Member: _____

TASN Positions you have held: _____

TASN/SNA Presentations you have done: _____

Education/Certifications that you have: _____

Other Information you would like to include: _____

Goals for Office: _____
