



TASRO Board of Directors

Application Form



Position Applying For:

Executive Office:

Second Vice President Secretary Treasurer

Regional Director:

Region 1 Region 2 Region 3 Region 4 Region 5
 Region 6 Region 7

Applicant Information

Applicant's Name: _____

Years as TASRO Member: _____

Current Occupation: _____

Current Position/Assignment: _____

Agency Name: _____

Agency Address: _____

City: _____ State: _____ Zip: _____

Telephone # _____

School / School District: _____

Candidate's Brief Biographical Sketch

Candidate's Brief Biographical Sketch (continuation)

Candidate's Signature: _____ Date: _____

Return to:
T.A.S.R.O.
Attn: Lynelle Sparks
P.O. Box 5104
Frisco, TX 75035

Or: Scan and e-mail to lynelle.sparks@tasro.org

For Office Use Only:

Is the member in Good Standing: YES NO

Date Received: _____ Forwarded to Committee: _____

Nominee's membership verified: _____ Nominator's Membership Verified: _____