

North Carolina Quilt Symposium, Inc.

RECOMMENDATION FOR APPOINTMENT TO BOARD OF DIRECTORS

- 1. Name, address, email address, and telephone number of person being recommended to the nominating committee for nomination to serve as a director of NCQSI:**

Name

Address

City

Zip

Email Address

Telephone

- 2. Educational background and work experience:**

- 3. Length of time involved in the field of quilt making:**

- 4. Where was the art of quilt making acquired?**

- 5. Are you a member of a guild? Name and location? What offices have you held?**

- 6. What regional and national organizations do you belong? Any offices held?**

7. What other experiences do you feel have helped to prepare you for serving as director?

8. List all quilt shows, conventions, symposia and related events you have attended.

9. Why do you want to be a director?

10. Add any information or comment you think would aid the board in assessing your abilities to be a director. (Use additional sheets of paper if needed)

Name of person making recommendation: _____

Telephone Number: _____

Email Address: _____

To be completed by NCQSI Nominating Committee

Date application received by Nominating Committee: _____

Date of conversation with candidate: _____

Name of Nominating Committee Member: _____

“...promoting and preserving quilting in North Carolina.”