

**AMTA-MO Chapter Board of Directors**

**Candidate Application& Supporting Information**

**Please complete on or before April 4, 2018**

**Please print or type the followingand send to the Online Elections Coordinator:**

🞎Application information (this page)

🞎\*Biography(maximum 300 words, see below for suggestions)

🞎\*Photo(preferably head shot taken within past year)

🞎[Sign Chapter Volunteer Code of Conduct](https://www.amtamassage.org/chapters/codesofconduct/index.html)(electronically on Chapter Page of AMTA National website)
*\* Biography & photo along with name and position will appear on chapter online elections page.*

**Please Check One:**

🞎 [2-year term: President (2018-2020)](http://docs.wixstatic.com/ugd/b252f0_3ba981a089c342e69835564495320e75.pdf)

🞎 2-year term: [Board Member (2018-2020)](http://docs.wixstatic.com/ugd/b252f0_295707907175421187174ff838a12ad5.pdf%22%20%5Ct%20%22_blank)

🞎 [2-year term: Secretary (2018-2020)](http://docs.wixstatic.com/ugd/b252f0_e232023945a44145b687c46d9d331ead.pdf)

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AMTA Member ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Main Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please place “X” next to each YES box:**

\_\_\_\_\_\_ YES I am a Professional Member (includes Graduate Member) in good standing.

\_\_\_\_\_\_ YES I have computer & telephone access for chapter business.

\_\_\_\_\_\_ YES I am able to commit for the entire term of office selected.

\_\_\_\_\_\_ YES I am willing and able to commit the time required for this position.

\_\_\_\_\_\_ YES I can travel for volunteer activities.

\_\_\_\_\_\_ YES I have read the position description for the position for which I am applying.

**Biography (Max 300 words):** In your own words, please share why you would like to run.You can type your biography below or attach it separately.

Suggested topics but not limited to:

* What chapter, national, or committee positions have you held (or helped with) in the past (Include dates)?
* What is your vision, reason and/or objectives for becoming an AMTA-MO Chapter Team Member?
* What do you see yourself contributing to this position?
* What are your strengths/qualifications, talents, skills and/or abilities for this position? (Include any past work experience)
* What are your community and professional experiences? (can includeyour practice, education, volunteering)

**Type your biography here (or attach separately):**

**Please contact Angeline Carmichael with any questions & submit this page along with biography & photo to:**

**Online Elections Coordinator,
Angeline Carmichael**

**Angeline.carmichael@gmail.com**

**573-819-3311**

**You will receive an email confirmation that your application was received.**