



**TruLeap Technologies
PO Box 89
Filer, ID 83328**

Board of Directors Nomination Form

The purpose of the TruLeap Technologies is to improve the quality of life in rural Idaho by providing the latest technology solutions to the areas we serve.

We are accepting nominations for our Board of Directors, to be elected at our next Annual Meeting in March. Board members must be motivated people with a passion for furthering the purposes of TruLeap Technologies. Board members meet monthly on the 3rd Monday of each month unless it is rescheduled by the Board. Board members are elected for a three-year term.

Please use this form to nominate an individual to the board. Any Class A member may submit a nomination. Self-nomination is welcome. All nominations will be reviewed by a Nominating Committee.

Individuals will be contacted by the Committee for an interview if needed. If the member meets the qualifications for Board representation, that person will be presented to the Membership for election.

This form must be completed and returned by January 31st of the election year to be considered.

Please return the completed form to: TruLeap Technologies, PO Box 89, Filer, ID 83328.

Nominee's Information

Name _____

Address _____

Home phone _____ Work Phone _____

Cell Phone _____ Email _____

Occupational Experience/Information

Current Occupation _____

Title _____

Company/Organization _____

Company Address _____

Phone _____

Professional or Other Experience (if relevant to board membership) _____

Membership on Board of Directors of other organizations? (circle one) Yes No

Name and Address, and Type of Organization (s) _____

Other Relevant Volunteer Experience _____

Why is this nomination being made? What are this Nominee's strengths and/or skills, and

what can he or she add to TruLeap Technologies as a member of the Board of Directors?

Is there anyone else the nominating committee can talk to about this person?

Name _____

Contact Information _____

Individual submitting Nomination (if other than self-nomination)

Name _____

Address _____

Phone _____ Cell Phone _____

Email _____

Relationship to Nominee _____