BOARD OF DIRECTORS POTENTIAL CANDIDATE FORM

Name								
Home Address								
City	State	Zip Code						
Home Phone Number		Work Phone Number						
Fax Number		Email Address						
Current Occupation								
Prior Work Experience								
Education								
Gender	Age	Ethnicity						
Relationship to NSN (Comm	nittee work, state liai:	son work, conference attendance, etc.	.)					
Involvement in storytelling								
Community / Volunteer Com								
Community / Volunteer Serv	rices							
Civic/Professional Associat								
Prior Board Experiences								
Interests								
References								
Date of availability for Board	d Service							

SKILLS AND EXPERIENCE FORM

Please rate yourself in the following categories by inserting an X in the appropriate column. "5" is Extensive Experience and "0" represents No Experience. You can type directly into the table.

Name:

name.	Ex. Exp.					No Exp.
Skill	5	4	3	2	1	0
Storytellers: freelance						
community						
school-based						
religious						
health-care						
other (describe)						
Education/Teaching						
Folklore						
Library and Information Services						
Computer/Technological/Internet						
Writing & Editing						
Graphic Design						
Publishing						
Media (video, tv, film, etc.)						
Marketing and Public Relations						
Management						
Arts						
Corporate						
Small Business						
Nonprofit						
Law						
Finance or Accounting						
Leadership Training & Development						
Board Training & Development						
Membership Development						
Volunteer Training & Development						
Human Resources						
Fundraising						
Individual						
Grants/Foundations						
Corporate						
Governmental						
Strategic Planning						
Event/Festival Organizing & Administration						
Other (please list and rate)						
Other (piease list and rate)						