

DCCW OFFICER CANDIDATE INFORMATION FORM

Due: June 15, 2020

Email: Marcie@saintolaf.net

		or the position: First VP/P Secretary		Secon	nd Vice President surer
Name:					
Address:					
City:		St	ate:	Zip:	
Home Phone	:()				
Cell or Alt. Ph	none ()				
Email Addres	ss:				
Current Paris	sh:				
Briefly answert	he three questions belo	pw:			
served ov	i, committees you nav	e chairea, offices you	nave nela ana i	anything else b	you would like to share:
2. Líst othe	r organization experie	nce, employment, cou	rses of study, o	etc. pertinent to	this application.
3. Please g DCCW o		ı about yourself: hov	v you became	involved with 1	>CCW, reasons for seekin

