

Mississippi School Boards Association Profile

Please assist the MSBA in keeping accurate records by completing this form for our files.

Thank you for your cooperation!

Name: _____

Name to use for Name Badges (Nickname or Name You Go By) _____

Mailing Address: _____

Street Address: _____

City/State/Zip: _____

Phone: Work: _____ Home: _____ Cell: _____

Fax: _____ E-Mail: _____

School District You Represent: _____

Year you began serving on the board of this school district: _____

Year current term ends: _____

Occupation: _____

Education Level / College Degree _____

Female

Male

Title: Mr. Ms. Mrs. Dr. Miss

Other _____

Race: African American

Caucasian

Hispanic

Asian

Other

Age: Born 1997-2012 Generation Z

Born 1981-1996 Millennials

Born 1965-1980 Generation X

Born 1946-1964 Baby Boomers

Born 1928-1945 Traditionalists

Congressional District: 1 Kelly

2 Thompson

3 Guest

4 Ezell

Whom on your board are you replacing? _____

Are you currently serving as Board President/Chairman? Yes No

The information you provide for this profile is confidential, and will only be released to organizations that are non-profit and support the mission of the Mississippi School Boards Association. If you prefer that your information not be released, please check here . Please return this form by mail, email, or fax to:

Mississippi School Boards Association

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Fax: 601-924-2002

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