

## 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:  18-30

31-45

46-50

51-60

Over 60

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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