

This is a fillable PDF. Please download the form (do not try to fill it out online); then fill it out using Adobe Acrobat (or any other free PDF viewer), save it with filename "[CANDIDATE NAME] Board Nomination Form", and send it to jobs@americanhiking.org with "Nomination of [CANDIDATE NAME] to the Board" in the subject line.

American Hiking Society Board Nomination Form

Self-Nomination

Nomination for someone else

Prospect is aware of the nomination

1 CONTACT INFORMATION FOR CANDIDATE

NAME

MOST RECENT PROFESSIONAL OR VOLUNTEER AFFILIATION & TITLE (including homemaker/caregiver/etc.)

CONNECTION TO AMERICAN HIKING (if applicable)

PREFERRED ADDRESS:

PREFERRED PHONE:

PREFERRED EMAIL:

If applicable, please provide the following:

LINKEDIN

TWITTER

:

INSTAGRAM:

FACEBOOK

:

WEBSITE:

2 CONTACT INFORMATION FOR NOMINATOR (skip if self-nomination)

NAME:

MOST RECENT AFFILIATION AND TITLE

CONNECTION TO AMERICAN HIKING (if applicable)

PREFERRED ADDRESS

PREFERRED PHONE

PREFERRED EMAIL



3 QUALIFICATIONS OF CANDIDATE

SPECIAL SKILLS AND COMPETENCIES (Check all that apply)

Business Management	NextGen Engagement
Education	Justice, Equity, Diversity, and Inclusion
Fundraising/Development	Advocacy and/or Lobbying
Board Governance	Communications/Media
Health Sector	Public Policy
Finance/Accounting	Nonprofit Consulting
Legal	Volunteer Programs
Marketing/Public Relations	Creative Arts/Dance/Theater/Music
People with Disabilities	Other skills (please list)
Personnel/Human Resources	

PROFESSIONAL BACKGROUND (Check all that apply)

For-profit business	Retired?
Nonprofit organization	Retired?
Government	Retired?
Self-employed	Retired?
Other, please specify	Retired?

EDUCATION and TRAINING (Optional)

Some college coursework
Associate's or Tradeschool Degree
Undergraduate Degree
Some graduate coursework
Graduate Degree
Other Education or Training (please specify)

AFFILIATIONS WITH OTHER NONPROFIT AND PROFESSIONAL ORGANIZATIONS (Please list all previous and current.)

OTHER BOARD SERVICE (Please list all previous and current):

PROFESSIONAL LICENSES OR CERTIFICATES (Please include applicable jurisdiction(s) and whether current.)

WHAT WOULD MAKE THIS CANDIDATE AN EXCELLENT AMERICAN HIKING BOARD MEMBER (including, but not limited to, candidate's interest in hiking and/or other outdoor recreation)?

4 DEMOGRAPHIC INFORMATION (OPTIONAL)

American Hiking does not discriminate on the basis of gender identity or expression, sexual orientation, race, creed, religion, age, ability, or any other identifier. In order to track the effectiveness of our recruiting efforts and to ensure we consider the needs of all our board members, please consider the optional questions below. If this is not a self-nomination, please only fill-out this information if you have expressly discussed it with the candidate -- do not make any assumptions.

HOW DOES THE CANDIDATE IDENTIFY THEMSELVES (CHECK ALL THAT APPLY)?

GENDER

Male
Female
Non-binary/Third Gender
Prefer not to specify
Prefer to self-describe

RACE or ETHNICITY

White
Hispanic/Latinx
Black/African
Native American/Indigenous
Asian/Pacific Islander
Prefer not to specify
Other/Prefer to self-describe

PRONOUNS

He/Him/His
She/Her/Hers
They/Them/Theirs
Prefer not to specify
Prefer to self-describe

DISABLED?

Yes
No
Prefer not to specify
Anything else you'd like us to know?

SEXUAL ORIENTATION

Heterosexual
LGBTQIA2-S
Prefer not to specify
Prefer to self-describe

AGE

18-30
31-40
41-60
60+
Prefer not to specify

IS THERE ANYTHING ELSE THE CANDIDATE WOULD LIKE TO SHARE ABOUT THEIR IDENTITY?