

SankofaSpirit

Looking Back to Move Forward

(770) 234-5890 • www.sankofaspirit.com

P.O Box 54894 • Atlanta, Georgia 30308

SankofaSpirit Nomination Form

Please include my name for consideration as a member of the SankofaSpirit Board of Directors

Name of Nominee: _____

Company: _____

Address: _____

City/State/Zip: _____

Telephone: _____ Email: _____

Business and/or Profession: _____

What personal, professional, and Board experience do you have that would contribute to the progress of SankofaSpirit? _____

Why are you interested in our organization? _____

Area(s) of expertise/Contribution you feel you can make _____

Other volunteer commitments _____

Is there anything else you would like SankofaSpirit to consider in reviewing your nomination?

I have included my bio and photo at info@sankofaspirit.com

Your name: _____ Date: _____