

the Beginning Experience Great Britain & Ireland Region

Local Board Endorsement Form I

To be completed by person making the nomination

Name of Nominee:										
Name of Team: Length of time on Team: Address of Nominee:										
							Phone:			
							How has the nominactivities and results. Yo necessary.	nee been active in BE? u may use more space	•	
2. Please list the five	most valuable qualities	of the nominee fo	r Regional Board:							
3. What motivated yo	What motivated you to place this person in nomination?									
4. Has this person be	en nominated before?	Yes No W	nen							
Signature:										
(Person making nomination	on)									
Signature:(Person making nomination)		Phone:								
Signature:(Local Board President)		Date:								



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Personal Response Form II

Name of Nominee:		
Name of Team:		
Address of Nominee:		
Phone:		
Marital Status:		
Occupation:		
No. and Ages of Children:		
Place of employment:		
Phone:Fa	x:	Email:
Are you able to take calls at wo	rk?	
Are you able to attend 1 weeker	nd long board meet	ing per year?
(Please attach a recent photograph so	we might put a face wit	h your name)
What previous experience do	o you have with BE	and community service? (Please

2. What particular skills do you have that you would be able and willing to share with the Regional Branch? Give examples of previous contribution of skills.

be specific)

3.	3. How do you see the Regional Branch enhancing the value	of BE?
4.	4. Why would you like to become a member of the Regional B	ranch?
5.	5. Have you participated in BE Regional and/or International Of If so when, where and how?	Conferences?
	6. What experiences have you had in finding funding for your groups)?	local team (or other
7.	7. Is there any additional information you would like to add?	
Sid	Signature: Date:	