

7 Skyline Drive, Suite 350, Hawthorne, New York 10532 (914) 964-8272 ♦ e-Mail: taracircle@aol.com ♦ www.taracircle.org

BOARD OF DIRECTORS NOMINATION

Nominee's Information:		
Name:		
Address:		
Phone:	e-Mail:	
Qualifications for Boa Extracurricular Activitie	ard Membership (e.g. Heritage, Education, Work Expes, etc.):	perience,

Please attach additional paper if needed.

Individ	ual submitting Nomination (if other than self-nomination):
Name: _	
Title: _	
	ation:
Phone:	e-Mail:
Please o	heck here if you have nominated someone other than yourself
	I hereby acknowledge the person I have nominated, and if elected, has consented to serve as a Director for the three year term effective 1/1/2024.
Signatu	re: Date:
	omplete this form in its entirety and return via postal mail postmarked no an October 19, 2023 to:
	The Tara Circle, Inc.

The Tara Circle, Inc.
Attention: Nominating Committee
7 Skyline Drive, Suite 350
Hawthorne, N.Y. 10532

Only written nominations received by the due date will be considered.