

INFORMATION SHEET

If you are interested in participating and being active in NSNA, please fill out the following questionnaire and return it to either your instructor or the NSNA representative.

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Degree of study: Associate's / Bachelor's

Do you consider yourself a team-player? Y or N

Are you willing to participate in the required amount of events? Y or N

Are you okay with taking directions from others? Y or No

Are you willing to give up 1 or 2 days during the summer to meet? Y or N

Please list any ideas that you may have for fundraising or community events.

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Are you interested in an Officer position? Y or N

If so which position: President Vice President Treasurer Secretary

Please describe what personal attributes you have that can benefit NSNA as a whole? \_\_\_\_\_

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