

ALUMNI SOCIETY OF CHRISTOPHER NEWPORT UNIVERSITY
Director Nomination Form

For the consideration of the Nominating and Elections Committee of the CNU Alumni Society, I wish to present the following alumnus/alumna as a prospective nominee for the ballot of the Board of Directors.

Name _____
Address _____
City/State _____
Telephone _____ FAX _____ e-mail _____

Additional Information

Year of Graduation _____ Additional Degrees _____

Name of Spouse _____

Names & Ages of Children _____

Occupation _____

Employer _____

Employer Address _____

City/State _____

Work Phone _____ FAX _____ e-mail _____

Title/Responsibility _____

Civic Affiliations _____

Offices Held _____

Awards/Honors _____

Student Activities while at CNC/CNU _____

Volunteer Activities with Alumni Society _____

Name of Nominating Alumnus/Alumna

Email Address

Signature of Nominating Alumnus/Alumna

Date

Mail to: Alumni Relations
1 University Place
Newport News, VA 23606