



*... Enhance Health and Wellness Opportunities and Programs
for the Students attending the Ocean City School District.*

Nomination Information And Application

Please return completed application within two weeks of receipt.

Ocean City Education Foundation
P.O. Box 1164
Ocean City, NJ 08226
(609) 335-0881

Criteria for Nomination

Recommended Trustee Characteristics:

- Proven Leadership Skills
- Understand the importance and benefit of enhancing health and wellness opportunities and programs for students attending the Ocean City School District
- Has demonstrated one or more of the following:
 - Dedication
 - Decision maker
 - Active in the community
 - Fund raiser
 - Understanding of business
 - Understanding of children
 - Manager
 - Marketer
 - Educator

Nomination Guidelines

The Nominating Committee for the Ocean City Education Foundation solicites candidates for leadership positions for the Ocean City Education Foundation Board of Trustees, if a seat is vacant. Trustee positions as well as officer positions need to be filled, if unoccupied. The number of Trustees shall be no more than 12 members. If all positions are filled, applicant may be offered a position on an OCEF committee. Each Trustee, except the Ex-Officio Trustees, shall serve for a term of one (1) year and may serve for no more than three (3) consecutive terms. An OCEF officer shall hold a term for two (2) years, with the 2-year term beginning March 1.

Interested nominees must complete a packet that includes the following:

Candidate is encouraged to submit as much information as possible to aid the committee in selecting the best OCEF Board Members. Additional information regarding candidate qualifications may be attached to the application.

The Ocean City Education Foundation Nominating Committee will meet within two weeks of receipt. The committee report will be filed with the Secretary of the Foundation ten (10) days prior to the meeting. Formal elections of candidates will be held at the next Foundation meeting.

All information should be sent to:

*Ocean City Education Foundation
P.O. Box 1164
Ocean City, NJ 08226*

Ocean City Education Foundation Board of Trustees Application

Name: _____

Firm(if applicable): _____

Mailing Address: _____

City, State, Zip Code: _____

Phone: _____

Email: _____

Position applying for: _____

Signature: _____

List Community Service/Volunteer Activities: _____

Strengths: *Please mark the appropriate box(es)*

Decision maker

Manager

Active in the community

Community Networking

Fundraiser

Marketer

Understanding of business

Educator

Foundation Development

Understanding of children

What makes our Mission meaningful to you? _____

Ocean City Education Foundation Board of Trustees Application

What skills, resources, and expertise do you have to offer and are willing to use if serving as an OCEF Trustee? _____

Please state the reason you are interested in serving: _____

If your application is accepted, you agree to attend at a *minimum of two-thirds* of regularly scheduled meetings.

Your signature: _____ Date: _____

If you are not selected as a Trustee, or if you decide not to join, would you like to be a volunteer to assist OCEF in various ways that match your skills and interests?

Yes No Perhaps

If you have questions, please contact OCEF President Jennifer Shirk at 609-335-0881 or e-mail jhshirk@verizon.net.