

District Director Nomination Form

Name: Ola Ford
School Board: Linden City
Address: 209 N. Main 54:
Linden, Al 36748
Telephone: $334 - 295 - 8802$ Fax: $334 - 295 - 8801$
E-mail: <u>Olaford@ live.com</u>
Nominated by: Dr. Timothy Thurmon
Years on the school board: $8years$
Academy status: Conpleted
Occupation: Self employeed
Other positions/information (optional): City of Linden Utility Board
Nominated by: Or, Thurmon School Board: Linden City
Permission for Nomination Form * (if not self-nominated)
I, <u>Qa Ford</u> , give my permission to be nominated for district director.
I, $\frac{\partial_a Ford}{\partial a}$, give my permission to be nominated for district director. Name Date

If you do not receive confirmation of your nomination from AASB in three business days, please resubmit the nomination and contact the AASB office. AASB will recognize the initial date of submission upon verification.

^{*} Completion of permission form is not necessary for self-nominations.