



**Board Member Application**

By submitting this application to be a member of the TEMSEA Board of Directors, you pledge to honestly and without prejudice or bias faithfully serve all members of this organization, supporting the organization's Mission and Vision.

**This completed form must be received no later than midnight, July 20, 2009.**

Mail to: TEMSEA  
Attn: Nominations Committee  
6025 Stage Road Suite 42-192  
Bartlett, TN 38134

**Clearly PRINT all Information**

Date of Application: \_\_\_\_\_ State EMS License #: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First MI

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Region: \_\_\_\_\_

If you are unsure which region you are in, go to <http://health.state.tn.us/EMS/RegionalOffice.htm>

Year became TN Instructor: \_\_\_\_\_ Teaching Affiliation: \_\_\_\_\_

Board Position Sought: \_\_\_ Region 1 \_\_\_ Region 5 \_\_\_ Region 6 \_\_\_ At Large

Committee(s): (desire to serve) \_\_\_\_\_

Have you served on this board before: \_\_\_ Yes \_\_\_ No

If yes, dates, and any officer position(s) and or committees: \_\_\_\_\_

Please provide a brief explanation of why you wish to serve as a volunteer TEMSEA Board Member and any specific qualifications you have that you feel will benefit this board and organization. You may attach your resume or CV.

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