

**ARIZONA STATE COUNCIL ESA
CANDIDATE FORM
2011 – 2012**

Please provide the following information:

NAME: _____ **CHAPTER:** _____
ADDRESS: _____ **CITY:** _____ **ZIP:** _____
PHONE: (HOME) _____ **(WORK)** _____
NUMBER OF YEARS IN ESA: _____
EXPERIENCE AS COUNCIL REPRESENTATIVE? _____
DOES CANDIDATE HAVE: A COMPUTER (OR ACCESS TO ONE)? _____
KNOWLEDGE OF BASIC BOOKKEEPING? _____
NUMBER OF STATE CONVENTIONS ATTENDED: _____
NUMBER OF INTERNATIONAL CONVENTIONS ATTENDED: _____

COUNCIL ACTIVITIES:

ELECTED OFFICES HELD: _____

APPOINTED CHAIRMANSHIPS HELD: _____

CHAPTER ACTIVITIES:

ELECTED OFFICES HELD: _____

APPOINTED CHAIRMANSHIPS HELD: _____

COMMITTEES SERVED ON: _____

HOBBIES, OTHER INTERESTS: _____

**PLEASE RETURN BY MARCH 31, 2011 WITH A LETTER OF CHAPTER
ENDORSEMENT TO:**

**Sheila McClure
AZ Council President
3407 W. Cambridge Avenue
Phoenix, AZ 85009**