



RECRUITMENT FORM
DIRECTOR

I _____
(PLEASE PRINT)

VOLUNTEER

EXECUTIVE DIRECTOR

Address: _____

Telephone # _____

e-mail address _____

Wish to submit my name for position as a Director on the Board of OASIS

Signature: _____

Rep. Organisation: _____

DIRECTOR ELECTION IS FOR TWO YEARS

This is to confirm our approval of _____ as a
nominee for a position of Director on the Board of OASIS.

Rep. Board Signature: _____

Date: _____