



## WALTON COLLEGE ALUMNI SOCIETY BOARD MEMBER NOMINATION

*Thank you for expressing an interest in becoming more involved with the Walton College Alumni Society Board of Directors.  
We appreciate your willingness to provide the following information.*

NAME OF NOMINEE \_\_\_\_\_ DATE of NOMINATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

EMPLOYER \_\_\_\_\_ TITLE \_\_\_\_\_

Graduation from Walton College (year) \_\_\_\_\_ Degree received /Major \_\_\_\_\_

Graduation from other institutions (year) \_\_\_\_\_ Degree received \_\_\_\_\_

Institution name \_\_\_\_\_

Are you able to commit 3 years of service to the Board? (see position description and requirements) YES NO

Will you be able to travel to Fayetteville twice a year for meetings? YES NO

Are you a current member of the Arkansas Alumni Association? YES NO

If any of the above answers are NO, please provide a brief explanation:

Why do you want to serve on the Board of Directors?

In what ways if any have you been involved with the Walton College since graduation?

List any student activities in which you were involved and/or honors you received as a student.

List any community/professional involvement or leadership roles.

*Completed forms along with a copy of your resume should be submitted to Rachel Burton, Alumni Relations Manager  
[rburton@walton.uark.edu](mailto:rburton@walton.uark.edu) or mail to 117 Business Building, 1 University of Arkansas, Fayetteville, AR 72701  
All nominations will be reviewed by the Nominations Committee annually.*