

**WISCONSIN SOCIAL SERVICES ASSOCIATION
INTEREST/NOMINATION FORM**

For the State Association positions of President-Elect, Treasurer and Historian
(Must be current WSSA Member)

I am interested in serving WSSA in the capacity of _____

I am employed by _____

My past State and Local Association positions are _____

I would like to nominate _____

For the position of _____

Their work address, phone number and e-mail address: _____

(all nominees will be contacted)

Name _____

Address _____

Phone _____ e-mail address _____

DEADLINE: March 1, 2012

Return form to: Jayne Carroll, 2011 - 2012 WSSA President
Shawano County
607 E. Elizabeth Street
Shawano WI 54166

Jayne.Carroll@co.shawano.wi.us