

## ENDORSEMENT FORM

Date \_\_\_\_\_

Renard Thomas, Chair  
TASB Nominations Committee  
P. O. Box 400  
Austin, Texas 78767-0400

This form to be used to endorse a nominated individual from a BOARD within your TASB Region who has completed the June 30, 2009 requirements.

**Endorsements will only be accepted if acted on from JULY 3 to AUGUST 29. Must be received in the TASB Austin office on or before AUGUST 29, 2009**

Dear Mr. Thomas:

Our school board endorses the candidacy of the following individual nominated to fill a position on the TASB Board of Directors.

### CANDIDATE INFORMATION

NAME: \_\_\_\_\_

SCHOOL DISTRICT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_, TEXAS ZIP \_\_\_\_\_

This endorsement was approved by our school district's board of trustees at a duly called meeting on

\_\_\_\_\_  
(Date)

Sincerely,

\_\_\_\_\_  
(BOARD PRESIDENT)

NAME: \_\_\_\_\_

SCHOOL DISTRICT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_, TEXAS ZIP \_\_\_\_\_

**Must be received in the TASB Austin office on or before AUGUST 29, 2009**

**RETURN TO:  
TASB, Attn: Management Services  
P.O. Box 400, Austin, Texas 78767-0400  
or FAX (512) 467-3554**