

## DIRECTOR RECOMMENDATION FORM

### Candidate Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Alternate Telephone: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

RSCM Membership: \_\_\_\_\_ Affiliate Institution (Name and Location: \_\_\_\_\_  
(check all that apply) \_\_\_\_\_)

\_\_\_\_\_ Individual

\_\_\_\_\_ Friend

Short Biographical Sketch: \_\_\_\_\_

---

---

---

---

---

---

---

---

Name and Location of person providing the above recommendation, if different than the Candidate:

---

### The Director will:

- Attend Board of Directors overnight meetings in January and August
- Be available for additional conference call meetings as needed
- Be a liaison between the Board, RSCM members, and the community at large
- Participate in RSCM local and regional events
- Serve a three-year term on the Board of Directors to be completed in January 2020, with the possibility to serve a second consecutive three-year term

Due date for receipt of this form at the RSCM America Office: **MONDAY, MARCH 27, 2017**

E-mail this form to:

**[office@rscmamerica.org](mailto:office@rscmamerica.org)**

or mail to **RSCM America Office, Westminster Choir College, 101 Walnut Lane, Princeton, NJ 08540**