



WEST VIRGINIA PARENT
TRAINING & INFORMATION

Application Form: Board of Directors

Date: _____

Name: _____

Home Address: _____

Home Phone: () _____

City: _____ Zip Code: _____

County: _____ Occupation: _____

Title: _____

Employer: _____

Work Address: _____

Work Phone: () _____

City: _____ Zip Code: _____

County: _____

Primary Email Address: _____

Secondary Email Address: _____

I am a (circle one of the below):

Parent Educator Attorney Business Person Other: _____

Why are you interested in serving on the Board and what areas of expertise can you contribute to the board?

You may email, fax, or mail to: WV PTI, 99 Edmiston Way, Suite 101-102, Buckhannon, WV 26201. Fax: 304-472-3548. Email: office@wvpti-inc.org