

Quinsigamond Community College Alumni Association
New Board Member Nomination Form

I would like to nominate the following individual to serve as a member of the
QCC Alumni Association Advisory Board

(Please type or print)

Name: _____

Last Name (if different at time of graduation): _____

Major: _____ Class Year: _____

Address: _____

City: _____

Phone: _____ Email: _____

Employer: _____

Job Title: _____

Please provide any additional information to support your nomination:

Nominated by: _____ Date: _____