

Application for Election to the OA Region One Board

See [Bylaws](#) Articles V, VI and VII and [Policies](#) Section 3 and 4 for job descriptions. Qualifications are listed in [Bylaws](#) Article V, Section 3.

Email completed application to nominations@oaregion1.org for consideration.

Please check the position for which you would like to be considered:

_____ **Second Member at Large:** 2 year term - Assembly 2023 to Assembly 2025

Name:	Intergroup:
Address:	
Phone:	Email:
Date joined OA:	Date continuous abstinence began:
SUMMARY OF OA SERVICE:	
WHAT BUSINESS, PROFESSIONAL OR OTHER EXPERIENCE AND SKILLS DO YOU BRING TO THE BOARD?	

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WHY DO YOU WANT TO SERVE IN THIS BOARD POSITION?

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BRIEF ACCOUNT OF YOUR OA STORY:

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<p>I commit to physical, emotional and spiritual recovery, one day at a time, while serving on the Region One Board. I pledge to provide support and encouragement to the recovery of my fellow board members. As a Region One Board nominee, my signature confirms that I meet the qualifications found in Bylaws, Article V, Section 3.</p>	
Signature:	Date: