

**Minnesota Citizens for the Arts
Board of Directors Nominations Form**



Nominee Name: _____

Home Address: _____

City, State, Zip: _____

Home Phone: _____

Legislative District: (If unknown, MCA can identify it for you): _____

Organization (If applicable): _____

Title (If applicable): _____

Work Address: _____

City, State, Zip: _____

Work Phone: _____

Please use the space below to describe your experience with your local arts community:

Please use the space below to describe your political experience (desired but not necessary):

Please use the space below to tell us why you are interested in serving on the MCA Board of Directors:

**Thank you! Please submit this form to MCA by September 1, 2007
by fax at (651) 917-3561
or by mail at 2233 University Ave West, Suite 355, St. Paul, MN 55114.**