



**BIOGRAPHICAL FORM
TO ACCOMPANY NOMINATION FOR DISTRICT OFFICE 2025 – 2027**

NAME:

ADDRESS:

TELEPHONE & E-MAIL:

CLUB:

CLUB ADDRESS:

YEAR JOINED ALTRUSA:

CAREER/PROFESSION:

DISTRICT OFFICES HELD: *(please state position held and time in office):*

CLUB OFFICES HELD: *(please state position held and time in office):*

DISTRICT COMMITTEE CHAIRS HELD:

CLUB COMMITTEE CHAIRS HELD:

OTHER ALTRUSA RESPONSIBILITIES: *(name of organisation(s)):*

IFF DAYS ATTENDED: *(number only)*

CONFERENCES ATTENDED: *(number only)*

CONVENTIONS ATTENDED:

ANY OTHER COMMENT / INFORMATION: