

Date \_\_\_\_\_  
month/day/year

**NOMINATION FORM**  
Board of Advisors, State Botanical Garden of Georgia

Nominee's Full Name: \_\_\_\_\_

Name Called: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Phone: home: \_\_\_\_\_ cell: \_\_\_\_\_ work: \_\_\_\_\_

Education: \_\_\_\_\_

Profession/ Occupation (current or previous): \_\_\_\_\_

Current Activities, Affiliations & Offices Held: \_\_\_\_\_

**Experience, Interests & Talents:**

Please check all that are applicable to help us understand the applicants' strengths and match new Board members to committees that fit their talents.

- |  |  |
|--|--|
| <input type="checkbox"/> Artistic  | <input type="checkbox"/> Graphic Design  |
| <input type="checkbox"/> Painting <input type="checkbox"/> Singing   | <input type="checkbox"/> Horticulture  |
| <input type="checkbox"/> Other: _____  | <input type="checkbox"/> Leadership  |
| <input type="checkbox"/> Computer Skills   | <input type="checkbox"/> Marketing   |
| <input type="checkbox"/> Interme. <input type="checkbox"/> Advanced <input type="checkbox"/> PowerPoint      | <input type="checkbox"/> Organizational  |
| <input type="checkbox"/> Creative  | <input type="checkbox"/> Photography   |
| <input type="checkbox"/> Development/ Fund Raising   | <input type="checkbox"/> Public Relations  |
| <input type="checkbox"/> Event Decorating/ Design  | <input type="checkbox"/> Public Speaking   |
| <input type="checkbox"/> Event Planning  | <input type="checkbox"/> Relationship Building   |
| <input type="checkbox"/> Financial   | <input type="checkbox"/> Tour/ Travel Planning   |
| <input type="checkbox"/> Flower Arranging: <input type="checkbox"/> Simple <input type="checkbox"/> Advanced | <input type="checkbox"/> Written Communications  |
| <input type="checkbox"/> Gardening   | <input type="checkbox"/> _____ Composition, <input type="checkbox"/> _____ Editing/ Proofing |

Other Skills or Comments: \_\_\_\_\_

Spouse's Full Name: \_\_\_\_\_

Spouse's Occupation/ Affiliations: \_\_\_\_\_

I/we have determined the nominee is willing to serve if nominated.

I/we have discussed with the nominee the expectations of Board members (see reverse side).

**Please initial above and sign below.**

Nominators: \_\_\_\_\_ and \_\_\_\_\_

Completed nomination form includes:

- Completed nomination form completed by primary sponsor.
- Endorsement letters from both the sponsoring Board member and the endorsing Board member.

Nomination form and letters must be received at the State Botanical Garden by **January 15**. All nominations require a co-nominator. One of the nominators should ascertain the nominee's willingness to serve if appointed and convey clearly and succinctly the expectations of Board members. It is very important that the nominator **not** convey to the nominee any assurance of appointment. In most years, the number of nominees will exceed the available positions on the Board. We would, however, like to know in advance that there is reasonable assurance that the nominee will accept appointment if asked.

\*\*\*\*

## **BOTANICAL GARDEN BOARD OF ADVISORS**

### **EXPECTATIONS FOR MEMBERSHIP**

- 1 – Pay annual dues
- 2 – Attend four Board meetings per year, either in person or virtually.
- 3 – Support the Gardens of the World Ball with a financial commitment as a Sponsor and attendance\*
- 4 – Support the Garden's capital campaigns
- 5 – Consider a planned gift to the Garden in your estate plan.

\*Or other comparable financial commitments to other Botanical Garden initiatives.

\*\*\*\*

Send all nominations to Tina Christie ([tina@uga.edu](mailto:tina@uga.edu)) at the State Botanical Garden. Complete nominations will be sent to the Board Membership Committee, who will make recommendations to the Executive Committee. The Executive Committee will then formally propose nominees to the full Board at the March meeting. Appointments approved by the Vice President of Public Service and Outreach would be effective July 1.

*Nomination form updated November 2023*