



TOGETHER, WE ARE OPRA



Advocate. Educate. Connect.

OPPORTUNITY AVAILABLE

Call for OPRA Board of Trustee Nominations

District 3

serving Athens, Belmont, Carroll, Coshocton, Gallia, Guernsey, Harrison, Hocking, Holmes, Jackson, Jefferson, Meigs, Monroe, Morgan, Muskingum, Noble, Perry, Ross, Tuscarawas, Vinton, and Washington Counties

Do you want to be more involved in what is happening in the DD industry throughout the state? Do you have experience and expertise to share? Here's your chance to help lead the Association dedicated to supporting and enhancing community-based service providers for persons with developmental disabilities in Ohio!

The representative will fill a 3-year term, and will serve through **December 31, 2017**. Who do you think could serve your District and the entire provider community best?

Benefits include:

- A role in advancing the profession of community-based service providers
- Exposure to a wealth of personal and professional contacts
- Access to up-to-date information about the challenges facing service providers and the service system
- The opportunity to exchange ideas and perspectives with other service providers, government officials and advocates

Qualifications:

- A Member in good standing from **District 3**
- Demonstrated commitment to OPRA and the service provider community
- Attendance and participation at OPRA Board meetings, District meetings, and involvement in OPRA committees
- Willingness to fulfill responsibilities defined in the Code of Regulations

If you are interested in serving as an OPRA Trustee or would like to nominate a candidate who has given his/her agreement to run, please submit the attached nomination to:

Anna Barrett, Executive Director

Independence, Inc.

161 E Main St

Ravenna OH 44266

330-296-2851 – phone, should you have any questions

330-296-8631 – fax

NOMINATION FOR OPRA TRUSTEE

DISTRICT 3

For a term ending **December 31, 2017**

Please Print

Name _____

Title _____

Organization _____

Address _____

County _____

OPRA District

3

Telephone _____

Fax _____

Email Address _____

I have read the OPRA Code of Regulations and agree to comply with all articles and responsibilities pertaining to being an OPRA Trustee, should I be elected Trustee.

Signature

Date

Nominations must be received no later than 5 p.m. on November 12, 2014.

Mail or fax nominations to:

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