



TAD ADVISORY BOARD APPLICATION FORM

Fill out the following fields as best as possible. Fields with an * are required.
Once completed email this form to agraham@bemidjistate.edu.

APPLICANT INFORMATION

***Applicant's first name**

***Applicant's last name**

Applicant's position in their company

***Which Advisory Board are you applying to?**

Art & Design

Engineering Technology

***Company name**

***Company street address**

***State / Province**

***Country**

CONTACT INFORMATION

***Name of company representative**

Same person as applicant?

Yes

No

***Phone**

Fax

***Email**