$\mathsf{Passed}\ \Box$ 

Did NOT Pass  $\Box$ 

Back to Groups  $\Box$ 

TO BE FILLED OUT BY PERSON MAKING THE NOMINATION				
Position:				
Nominee:				
Nomination made by: (Group/Individual)				

## **GEORGIA REGIONAL RESUME PROFILE**

Name		Your Area	
Address		City	
State	Zip Code	Phone	
E-Mail		Clean Date	

## NA Fellowship Service Experience

Dates (Latest First)	Length of Service	Position	Group/Area/ Region/World

Work Experience

Passed  $\Box$ 

Did NOT Pass  $\Box$ 

Back to Groups  $\Box$ 

What do you feel are your strengths?

What do you feel are your weaknesses?

What accomplishment(s) in your job, in service, and/or throughout your life are you most proud of?

What do you believe you can bring to Regional Service?

Why do you want to serve?

**Additional Comments** 

Revised March 2021