

Section 1.1 **R4 WSBC Delegate Application**

Submitted for consideration at the R4 Assembly in the fall of 20_____.

I am applying for a position as a WSBC Delegate for R4.

Full Name _____

Address _____

Phone _____ Email _____

Years in OA _____ Years of service beyond group: _____

Date continuous abstinence began: _____

Brief account of my OA story (Physical, Emotional and Spiritual)

Summary of my OA responsibilities:

I can bring the following business, professional or other experience and skills to the Region:

I would like to be a Region WSBC Delegate for the following reason(s):

I certify that I have read the qualifications and duties of the office of the WSBC delegate and understand the responsibilities of such position.

Signature of Candidate

Date

IMPORTANT

This form, when completed, must be sent to R4, 2355 Fairview Ave N, PMB 338, Roseville, MN 55113. Type or print in black ink only. Do not write beyond the margins. Enter all information on this form. Attachments will be reproduced for circulation to the Regional Representatives.

This application must be postmarked 60 days prior to the date of the Region Assembly.

It is each applicant's responsibility to verify receipt of application.

Additional copies of this form may be obtained from any R4 Officer or downloaded from the R4 website.