

TSO STATE LEADER APPLICATION
2025-27 DKG Texas State Organization
Application Due: February 1, 2025

Name: (Dr./Mrs./Miss/Ms.) _____

Address: _____

City/State/Zip: _____

Home Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Home Email: _____

Chapter: _____ Area _____ Birthday (month/day) _____ / _____

Current Professional Position: (If retired, give date and last professional position.)

PLEASE COMPLETE THE FOLLOWING (AS APPLICABLE)

Involvement in Texas State Organization include the year(s)

Chapter President of _____ Year(s): _____

___ TSO Leadership Sem. Participant: Year _____ Int'l Leadership Management Sem: Year _____

Achievement Award Recipient: ___ Chapter _____ year ___ State _____ year

List most recent committee(s) Service to TSO / ASTEF	Year	Select all that apply	
_____	_____	___ Chairman	___ Member
_____	_____	___ Chairman	___ Member
_____	_____	___ Chairman	___ Member
_____	_____	___ Chairman	___ Member

Attendance at Society meetings: (Select all that apply)

___ Area/Regional Workshop ___ State Conventions ___ International Conventions/Conferences

Indicate areas of interest in serving the Texas State Organization for the upcoming biennium

Area Coordinator of Area _____

1st Committee _____ ___ Chairman ___ Member

2nd Committee _____ ___ Chairman ___ Member

3rd Committee _____ ___ Chairman ___ Member

___ I will / ___ will not (select one) be willing to accept a different appointment.

I have the following technology skills (check all that are applicable):

Email _____ Text _____ Google Docs _____ Zoom _____ Social Media _____ Apps _____

Submit to: TSO HQ, Leesa Cole Email preferred: tsosecretary29@gmail.com by Feb. 1, 2025
Or Mail to: PO Box 797787 Dallas 75379 postmarked by Feb. 1, 2025