



## NSIP Board of Directors Application Form

**NSIP Mission:** *The National SAM Innovation Project provides a comprehensive process and set of tools designed to develop effective instructional leaders resulting in greater student success.*

**NSIP Vision:** *The National SAM Innovation Project will provide SAM services in every state resulting in greater teacher and learner success.*

**Board Expectations:** *NSIP Board members provide direction and vision for the National SAM Innovation Project. They annually review and sign the Board Member Job Description and the NSIP Board of Directors Standards of Practice Agreement. Board members must be able to attend two annual meetings in person: one during the summer and one on the Wednesday preceding the annual National SAM conference. All transportation, lodging and meal expenses are covered by NSIP. Additionally, Board members may be asked to participate in online meetings and provide input on NSIP issues.*

*This particular board member position provides the valuable perspective of a practicing SAM. As a dedicated SAM, there is committed participation in daily meetings with their SAM leader participant.*

### General Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### SAMs Experience

Please provide the following information regarding your experience as a SAM principal:

**SAM Experience**                      Dates: \_\_\_\_\_                      Location: \_\_\_\_\_

**Application Deadline: October 6, 2023** Submit Applications to: *NSIP Board President Bert Hendee* [bhendee2016@gmail.com](mailto:bhendee2016@gmail.com)

**Narrative Information**

Please provide a brief response to the following questions:

What makes the NSIP Mission and Vision meaningful to you:

What knowledge, skills and experiences can you contribute as a board member:

Why would you like to serve as an NSIP Board Member:

Your signature indicates your desire to be considered as a candidate for the NSIP Board of Directors

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Applicant Signature

Date

Your supervisor's signature indicates their approval for you to participate in activities required of members of the NSIP Board of Directors as outlined in Board Expectations at the top of this application.

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Signature of Applicant's Supervisor

Date

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