

HSTA-R VOLUNTEER QUESTIONNAIRE

Name _____ Phone _____

E-mail address _____

HSTA-Retired depends on volunteer leaders to run our organization and carryout its activities on behalf of the general membership. We invite every member to become involved in our organization. Please, consider becoming a volunteer and help HSTA-R become an organization of which we can all be proud.

1. Can we count on you to be a HSTA-R volunteer? _____ Yes _____ No

2. On which HSTA-R level would you consider volunteering? (Check one)

_____ State _____ District _____ State and/or District

3. In what types of volunteer positions would you be interested? (Check your preferences)

_____ Elected officer, director, or council representative

_____ Committee chairperson

_____ Committee member

_____ Individual project volunteer

4. In which types of HSTA-R activities would you be interested? (Check your preferences)

_____ Membership (recruitment and retention)

_____ Member benefits (insurance, discounts, etc.)

_____ Membership activities (educational, social, recreational, etc.)

_____ Governance (elections, convention, charter and bylaws)

_____ Communications (newsletter, internet website, public relations)

_____ Retirement Issues (pension, medical benefits, etc.)

_____ Legislative (lobbying legislature, school board, etc.)

_____ Political Action (electing friends of public education, HSTA-R priorities)

5. Indicate any special talents, skills, and experiences that you may have which can be utilized by HSTA-R.

