

WASB Service Associate Application



Complete this form and return to: Sheri Krause, Director of Communications
WI Assn of School Boards
122 West Washington Avenue, Suite 400
Madison, WI 53703

Fax: 608.257.8386 Email: skrause@wasb.org

Attach three letters of recommendation from three Wisconsin school districts (one letter per district) that your organization has worked with.

Name of Main Contact for Application Title

Organization Name

Street Address

City State Zip Code

Phone Number

Website Email

Description of your organization's products and/or services:

Name two designees to receive complimentary subscriptions to *Wisconsin School News*.

Name: _____

Street Address

City State Zip Code

Name: _____

Street Address

City State Zip Code

Submitter Name (print) Title

Submitter Signature Date

The WASB Board of Directors will review your application. Questions?
Contact Sheri Krause, WASB Director of Communications, at 608-512-1705 or skrause@wasb.org.