



# NARCOTICS ANONYMOUS

WORLD SERVICE BOARD OF TRUSTEES - P.O. Box 622, Sun Valley, Calif. 91352

QUESTIONNAIRE FOR TRUSTEE NOMINEES  
(the information on this questionnaire will be held strictly in confidence)

1. Personal Information

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Home Phone ( ) \_\_\_\_\_  
Occupation \_\_\_\_\_  
Company \_\_\_\_\_  
Business Phone ( ) \_\_\_\_\_  
Sobriety Date (if any) \_\_\_\_\_  
Affiliations other than N.A. \_\_\_\_\_

2. Are you able and willing to serve as a Trustee? \_\_\_\_\_

3. Do you meet the qualifications for Trusteeship? \_\_\_\_\_

4. Would you be able to attend the W.S.C. and our regular, quarterly meetings? \_\_\_\_\_

5. What experience do you have with N.A. Service Committees? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What other experience or abilities do you have that would benefit the fellowship? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. What would you do as a Trustee? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Why should you be selected as a Trustee, rather than some other nominee? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(use reverse if necessary)