



APPLICATION for BOARD of DIRECTORS

NAME: _____

HOME PHONE: _____

ADDRESS: _____

YOUR OCCUPATION: _____

BUSINESS PHONE: _____

YOUR BACKGROUND

What skills could you contribute to our board?

___ accounting

___ marketing

___ public relations

___ investment

___ fundraising

___ knowledge of services

___ management

___ education

___ professional skills

___ other (please explain) _____

Please list any charitable or community activities in which you have been involved: _____

YOUR AVAILABILITY TO SERVE

Could you regularly attend board meetings? Yes No

Conflicts: _____

How many hours per month could you regularly serve our organization?

Would you contribute financial support to our organization? Yes No

Would you participate in fundraising? Yes No

Would you attend a training session for new board members? Yes No

YOUR VIEW ON OUR ORGANIZATION

What is your interest in our organization?

Please write a brief statement of your understanding of the mission of our organization.

REFERENCES (List names, address & phone #'s)

Signature _____ Date _____