



Board of Directors Committee Application

DATE: _____

NAME (Last, First, MI): _____

ADDRESS (Street Address or PO Box): _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____ email: _____

EMPLOYMENT

Business/Profession/Other: _____

AREAS OF INTEREST

- Finance/Accounting
- Marketing/Public Relations
- Facility
- Education & Research
- Development/Fundraising

COMMUNITY ACTIVITIES

Why are you interested in joining a committee?

Other information you would like to share:

Date

(Signature of Applicant)

