

## Form for Prospective Board Candidates

Name of Prospective Member \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(\_\_\_\_) \_\_\_\_\_ (home); (\_\_\_\_) \_\_\_\_\_ (office)

E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

Organization \_\_\_\_\_ Position \_\_\_\_\_

Areas of Expertise (please check all that apply)

Business/Corporate

Human Resources

Education

Legal

Financial Management

Public Relations/Marketing

Fundraising

Non-Profit management

Government

Philanthropic community

Health Services

Volunteer Management

Other areas of expertise/skills:

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