

## **CommUnity Board of Directors Board Candidate Application**

Name:		Date:
Addres	s (Street):	
Addres	s (City, State, Zip):	
Telephone: (home)		(Cell)
E-mail:		
Occupa	ation:	
Please	indicate your areas of expertise/invo	Ivement and/or interest (Check all that apply):
	Area of Expertise	Fundraising
	Administration	Health Care
	Advocacy	Human Resources
	Arts and Entertainment	Human Services
	Business	Legal
	Faith-Based	Law Enforcement
	Communications/Media	Neighborhood/Community
	Compliance	Politics
	Diversity/Cultural Awareness	Program Development
	Education	Public Relations/Marketing
	Entertainment	Strategic Planning
	Evaluation	Technology
	Finance	Labor Union
	Other (Specify):	
Curren	at and Past Volunteer/Community Invo	alvement:
	,	



## **CommUnity Board of Directors Board Candidate Application**

Why are you interested in servi	ng on the CommUnity Board of Directors?
	s do anything to make it easier to participate on the Board ation, disability accommodation)?
	FOR BOARD USE ONLY:
For Board Nominator to Complete	<b>:</b> :
Nominator:	Date:
Reasons for Nomination:	