



**NORTH BAY AND AREA
COMMUNITY FOUNDATION**

BOARD OF DIRECTORS APPLICATION FORM

NAME:

ADDRESS:

DATE OF BIRTH:

PHONE/EMAIL:

SIGNATURE:

EXPERIENCE

PLEASE LIST YOUR PROFESSIONAL OR VOLUNTEER AFFILIATIONS:

PLEASE LIST ANY NONPROFIT EXPERIENCE:

WHY WOULD YOU LIKE TO SERVE AS A MEMBER OF THIS BOARD?

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SKILLS:

MARKETING

NONPROFIT GOVERNANCE

FINANCE

SOCIAL MEDIA AND WEBSITE

FUNDRAISING

COMMUNITY SERVICE

LAW

OTHER:

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HOW WOULD THE COMMUNITY FOUNDATION AND OUR AREA BENEFIT FROM YOUR ELECTION TO THE BOARD OF DIRECTORS?

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NOMINATIONS WILL BE REVIEWED FOR FUTURE VACANCIES AND WILL BE MAINTAINED FOR FUTURE CONSIDERATION. THANK YOU FOR YOUR INTEREST IN SERVING ON THE NORTH BAY AND AREA COMMUNITY FOUNDATION BOARD OF DIRECTORS

