



## Board of Directors Application Form

1. Candidate Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Method of Contact: ( ) Home Phone ( ) Work Phone

2. Current position & employer: \_\_\_\_\_

3. Please describe your relevant experience and/or employment. You may also attach a resume.

4. Please describe the area(s) of expertise/contribution you feel you can make to further the mission of FRVCSD:

5. Please list prior experience serving as a Board member for other non-profit organizations:

6. What other volunteer commitments do you currently have?

7. The FRVCSD Board of Directors meets on the Wednesday following the 10th every month at 6:00 p.m. The meeting generally lasts about one (1) hour. Do you have any standing commitments that create a scheduling conflict for you? Yes\_\_\_\_\_ No\_\_\_\_\_

8. Why are you interested in serving as a Board member for FRVCSD?

9. Please share any other information you feel important for consideration of your application to serve as an FRVCSD Board member.

---

***For Board Use***

_____	Nominee has had a personal meeting with either an Officer, Director, or other.	Date _____
_____	Nominee reviewed by the committee.	Date _____
_____	Nominee proposed to the Board.	Date _____
Board action:	_____Elected	_____Rejected
		Date _____