

Board of Directors Application Form

Thank you for your interest in joining a non-profit Board! Please fill out this form to provide useful information about yourself, to ensure the best match between you and Pathways of Wisconsin, Inc that might want to consider you for the Board of Directors. The following information will be shared with our current Board members.

Your name:_____

Your Home Phone Number: _____Cell number: _____

Your address: _____

Your email address (please write it carefully):

Briefly describe why you would like to join our Board of Directors:

Your current organizational affiliations (names of the organization and your role(s):

1.	
2.	
3.	
4.	
4.	

Which of your skills would you like to utilize on the Board? Check those that apply:

Board development	Financial management	Training
1	8	0

□ Strategic planning	□ Fundraising	□ Marketing			
□ Staffing / HR	□ Evaluation	□ Volunteer management			
Program development	□ Community networking	□ Facilities management			
Other skill(s) of yours that you would like to utilize?					

What would you like to get for yourself out of your participation on the Board, e.g., what types of experiences, skills to develop, interests to cultivate for you, etc.?

If you join the Board, you agree that you can provide at least 2-4 hours a month in attendance to Board and Committee meetings, and that you do not have any conflict-of-interest in participating on the Board.

Your signature: Date:

If you are not selected as a member of the Board, or if you decide not to join, would you like to be a volunteer to assist our organization in various ways that match your skills and interests?

 \Box Yes

 \Box No

□ Perhaps