



BOARD MEMBER APPLICATION

Name: _____ Date: _____
Address: _____ City: _____
State: _____ Zip: _____ Email: _____
Home: _____ Cell: _____ Work: _____

Background Information

Occupation: _____
Employer: _____ Employer's Phone: _____
Employer's Address: _____
Work Experience: _____
Education Degree: _____
Special Skills, Interests, Hobbies: _____
Church Affiliation/Name & Address: _____

Board Information

How did you hear about the CC Board? _____
Why do you wish to serve on the CC Board? _____

Are you currently or have you served on other board(s)? List: _____

What area of expertise can you contribute to CC? Please check:

Fundraising	Marketing/Advertising	Speakers Bureau
Public Relations	Building/Grounds	Financial Management
Other: _____		

Days/times you are unable to participate in our activities? _____

Agreement and Signature

I will hold confidential any information concerning the clients and business of Christian Care. I affirm that the above information is true and complete to the best of my knowledge.

Signature _____ Date _____

Thank you for choosing to volunteer for CHRISTIAN CARE!

You will touch the lives of many people with your kindness and generosity.