



BOARD MEMBER APPLICATION

Contact Information:

Name _____ Date _____

Address _____

Phone: (Home) _____ (Work) _____

Other Contact: (Cell) _____ (Email) _____

Background Information:

Occupation: _____

Employer: _____ Employer's Phone: _____

Employer's Address: _____

Work Experience: _____

Church Affiliation
(Name and Address): _____

Education/Degree: _____

Special Skills, Interests, Hobbies: _____

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 areas of expertise can you contribute to CC?

____ 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 and Date: _____

Name (Printed): _____