

Board of Directors Candidate Application Form

Name:		
Mailing Address:		
Cell Phone:	Email:	
Employer:		
Employee Title:		
Work Phone:	Work Email:	
•	Board correspondence: 🛘 Persono	
	mittees that you serve on or have serval, recreational, religious, social). List	•
Skills, Experience & Interests	s (please check all that apply)	
□ Fundraising	☐ Financial Management	☐ Marketing & Communications
□ Community Service	☐ Management & Leadership	□ Outreach/Advocacy
☐ Policy Development	□ Nonprofit Experience□ Personnel, Human Resources	□ Program Evaluation □ Board Governance
□ Strategic Partnerships □ Facilities & Real Estate	☐ Strategic/Business Planning	☐ Other

the experience?	
How do you feel New Narrative would benefit from	your involvement on the Board?
Board members are asked to make a financial comm	·
□ Yes □ No (Please state why)	
Thank you for your interest in serving on the New No reviewed on an annual basis or as needed for upcom an active Board Member, s/he is required to attend b participate in Agency events, and contribute to the s	ning vacancies. Once an applicant is approved a bimonthly Board meetings, serve on a committee
The completed application may be sent to Julie Ibra OR 97223 or by email to jibrahim@NewNarrativePI	_
By signing this application, you are verifying that all	information provided is true.
Signature	 Date