



## Board Member Application – please attach a current resume

Name: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Occupation and employer: \_\_\_\_\_

Areas of Expertise (please check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Business/Corporate   | <input type="checkbox"/> Human Resources            |
| <input type="checkbox"/> Education            | <input type="checkbox"/> Legal                      |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Public Relations/Marketing |
| <input type="checkbox"/> Fundraising          | <input type="checkbox"/> Non-Profit Management      |
| <input type="checkbox"/> Government           | <input type="checkbox"/> Philanthropic Community    |
| <input type="checkbox"/> Health Services      | <input type="checkbox"/> Volunteer Management       |
| <input type="checkbox"/> Social Services      |   |

Other areas of expertise/skills:

Why are you interested in joining our organization?

What personal skills or strengths of yours do you think would benefit our organization?

Do you have a committee you'd like to serve on or a area of interest?

Assistance League of Phoenix  
9224 N. 5<sup>th</sup> Street Phoenix AZ 85020  
602-944-7636  
Executive@alphx.org



What other volunteer commitments do you currently have?

Have you served on other nonprofit organization boards? If so, please list: them and any offices you held:

***For Board Use Only***

\_\_\_ Nominee was referred by \_\_\_\_\_.

\_\_\_ Nominee was mailed an application packet. Date \_\_\_\_\_

\_\_\_ Nominee had a personal meeting with chief executive, board chair, or other board member.  
Date \_\_\_\_\_

\_\_\_ Nominee's application was reviewed by the nominating committee. Date \_\_\_\_\_

\_\_\_ Nominee was interviewed by the board. Date \_\_\_\_\_

Action taken by the board \_\_\_\_\_