



Board Application

First Name

Last Name

Street Address

City/State/Zip

Phone Number

Organization

Administrative Assistant information

Name _____

Email _____

Office Phone _____

Are you able to attend bi-monthly Board Meetings?

Yes

No





Please share any other information you feel is important for consideration of your application to serve as a SCHA-MI Board Member.

[Empty text box for additional information]

Skills, experience, and interests (select all that apply)

- Strategic Planning
- Fundraising
- Board development (recruitment, training, evaluation)
- Program planning and evaluation
- Recruiting, hiring, and evaluating personnel
- Financial management and control
- Communication, public and media relations
- Nonprofit experience
- Participation in interagency committees
- Public speaking
- Organizational development
- Information technology
- Special events (planning and implementation)
- Grant writing, journalism
- Outreach and advocacy

Other, please specify

[Empty text box for other skills, experience, and interests]

Please list any groups, organizations, or businesses that you could serve as a liaison to on behalf of SCHA-MI.

[Empty text box for groups, organizations, or businesses]



November 2022

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