



Board of Directors Application

DATE _____

NAME _____

ADDRESS _____

PHONE _____ EMAIL _____

EMPLOYER _____

POSITION/TITLE _____

ADDRESS _____

PHONE _____ EMAIL _____

Why would you like to be a board member for WOFCC?

How would WOFCC benefit from your involvement on the board of directors?

Other groups/organization/boards you are a member.

ORGANIZATION	ROLE/TITLE

How much time and effort are you able to commit to fundraising and community events, board meetings, and advocating for WOFCC to the community?

I have read the Board Member Roles & Board Member Code of Ethics and agree to uphold these principles during my time as a board member. (please initial)

SIGNATURE

DATE