



## Board of Directors Application Form Updated August 2020

Thank you for your interest in joining the Communities In Schools of Lakewood Board. After reviewing the Board Recruitment Packet, use this form to provide information about yourself, **in addition to a current resume**, so our Board can determine your alignment with our organization's values and the needs of our Board.

Your name: \_\_\_\_\_

Your Home Phone Number: \_\_\_\_\_ Cell number: \_\_\_\_\_

Your address: \_\_\_\_\_

\_\_\_\_\_

Your email address:

\_\_\_\_\_

Briefly describe why you would like to join the CIS Lakewood Board of Directors:

Your current (or recent) organizational, community or volunteer affiliations (names of the organization and your role(s):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Which of your skills would you like to utilize in serving the students of Lakewood on the Board?  
Check those that apply:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Board development               | <input type="checkbox"/> Financial management            | <input type="checkbox"/> Training              |
| <input type="checkbox"/> Strategic planning              | <input type="checkbox"/> Fundraising                     | <input type="checkbox"/> Marketing             |
| <input type="checkbox"/> Staffing / HR                   | <input type="checkbox"/> Event Planning                  | <input type="checkbox"/> Volunteer management  |
| <input type="checkbox"/> Nonprofit Governance            | <input type="checkbox"/> Evaluation                      | <input type="checkbox"/> Youth                 |
| <input type="checkbox"/> Knowledge of Lakewood community | <input type="checkbox"/> Community networking/organizing | <input type="checkbox"/> Development/Education |

Please share about the skill(s) or experiences that would benefit CISL Board and organization?

What would you like to get for yourself out of your participation on the Board (e.g., what types of experiences, impact, skills to develop, interests to cultivate for you, etc.?)

If you join the Board, you agree that you can provide at least 2-4 hours a month in attendance to Board and Committee meetings, and that you do not have any conflict-of-interest in participating on the Board.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you are not selected as a member of the Board, or if you decide not to join, would you be interested in learning more about other volunteer roles that assist our organization in various ways that match your skills and interests?

- ☐ Yes ☐ No ☐ Perhaps

**Please email your application and resume to Kerri Pedrick, Executive Director at [kerri@lakewoodcis.org](mailto:kerri@lakewoodcis.org)**