

## Board Member Application

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

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

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

Occupation and Employer: \_\_\_\_\_

*Please answer the questions below, if you need additional room, please submit the document with this application.*

- Why are you interested in joining our organization?
- What personal skill or strength of yours do you think would benefit our organization?
- Do you have a committee you would like to serve on or a particular area of interest?  
(*Nominating, Fundraising, Projects, Social Media*)
- 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:
- The (SKYRC) board meets frequently (once a month) on (the second Wednesday at 10:00 am). Do you see any scheduling problem that might affect your attendance? Yes or No

*Please sign below that you verify all the information above to be true.*

\_\_\_\_\_  
Signature of Applicant

Date \_\_\_\_\_

---

### ***For Board Use Only***

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

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

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

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

---

### ***The Southern Kentucky Reentry Council***

Attention: Nominating Committee

| 2530 Scottsville RD, Suite 1, Bowling Green, KY 42104 |

[info@southernkyreentry.org](mailto:info@southernkyreentry.org)