NewLife-Second Chance Outreach, Inc.

Board of Director (Board Member) Application Form

Complete this form and return to the Board Development Committee.

Name	Phone
Address	
Email	Profession
individuals to serve its community	and Chance Outreach, Inc. and its need for dedicated and passionate through its Board of Directors (if a current director encouraged you to
Relevant community experience a	nd/or employment (feel free to attach a resume, optional):
Why are you interested in serving	as a Director on the Board of NewLife-Second Chance Outreach, Inc.?
	ou feel you can make to NewLife-Second Chance Outreach, Inc. as a
Current work schedule (days and t	imes)
Other CURRENT volunteer commit	ments (days and times)
•	tings on a quarterly basis (Meetings are usually held in the evenings on urday afternoons)? Yor N If no, why not?

Are you willing to be ACTIVE in your role as a Director by attending meetings and contributing to the creation of policies and other business of the meetings? Y or N

NewLife-Second Chance Outreach, Inc. Board of Director Application

Rev. 12/24/2018

Do you agree to promote the organization and its mission among community members and other stakeholders? Y N	
Do you agree to attend workshops, events and forums hosted by NewLife-Second Chance Outreach, Incand/or its community partners? YN	>.
Do you agree to help raise funds, research and seek out grant opportunities AND contribute a <u>minimur</u> of \$120 annually (can be paid at once, \$10 a month or \$25 quarterly)? Y N	<u>n</u>
SignatureDate	
Print Name	
For Board Committee Use (DO NOT WRITE BELOW THIS LINE)	
Nominee has had a personal meeting with the Board Development Committee Chair, Board Chair, Organization Executive Director, or other Board Director. Date	
Nominee reviewed by the Board Development Committee. Date	
Nominee attended a board interest meeting. Date	
Nominee interviewed by the board. Date	
Action taken by the board:	

NewLife-Second Chance Outreach, Inc. Board of Director Application Rev. 12/24/2018