



Board of Directors Candidate Application

Date _____

Name _____
First MI Last Familiar name

Residence

Address _____
Phone _____ E-mail _____

Employer

Name _____
Your title _____
Address _____
Phone _____ E-mail _____
Type of business or organization _____
Primary service(s) and area/population served _____

Preferred method of contact: () Work () Residence
How long has your organization been a member of the ABA? _____

Please list boards and committees that you serve on, or have served on
(business, civic, community, fraternal, political, professional, recreational, religious, social).

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

Education/Training/Certificates

Have you received any awards or honors that you'd like to mention?

How do you feel the Arrowhead Builders Association would benefit from your involvement on the Board?

How do you feel you will benefit from your involvement on the Arrowhead Builders Association Board?

Skills, experience and interests: (Please circle all that apply)

- | | |
|----------------------------------|------------------------|
| Finance, accounting | Education, instruction |
| Personnel, human resources | Special events |
| Administration, management | Grant writing |
| Nonprofit experience | Fundraising |
| Community service | Outreach, advocacy |
| Policy development | Other _____ |
| Program evaluation | Other _____ |
| Public relations, communications | Other _____ |

Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of Arrowhead Builders Association.

Please tell us anything else you'd like to share.

Thank you very much for applying

In office use only:
Board Approval Date _____
Term _____
<input type="checkbox"/> Board Manual Received/Reviewed _____
<input type="checkbox"/> Bio Received
<input type="checkbox"/> Photo
Other _____

