

Application for Potential PLANCTX Board Members & Committees

Name

Home Phone: _____

Mobile Phone: _____

Address:

Email Address: _____

Referred by: _____

Have you received services from PLANCTX? Yes No

Relevant Experience and/or Employment (may attach additional sheet): _____

Interest in organization: _____

Area(s) of expertise/area of contribution: _____

Other volunteer commitments: _____

Available hours per month for PLANCTX Board commitments: _____

Please indicate your skills:

- | | | |
|---|---|---|
| <input type="checkbox"/> Accounting/
Bookkeeping | <input type="checkbox"/> Computer systems/
maintenance | <input type="checkbox"/> Planning |
| <input type="checkbox"/> Computer Skills: Word
Processing | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Program Evaluation |
| <input type="checkbox"/> Computer Skills: Excel | <input type="checkbox"/> Graphics | <input type="checkbox"/> Program Management |
| <input type="checkbox"/> Computer Skills: Quicken
for Nonprofits | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Computer Skills: Database | <input type="checkbox"/> Interpretation/
Translation
skills | <input type="checkbox"/> Policy Development |
| <input type="checkbox"/> Computer Skills: Other
(indicate)_____ | <input type="checkbox"/> Knowledge of Best
Practices in Mental
Health
service delivery | <input type="checkbox"/> Program Specific
Skills:_____ |
| _____ | <input type="checkbox"/> Legal | <input type="checkbox"/> Social Media |
| | <input type="checkbox"/> Marketing/advertising | |

Please attach brief bio (3 - 5 sentences) that we can share with the Board.

Name: _____

PLANCTX appreciates your interest, and your information will be considered confidential.

Does PLANCTX have your permission to conduct a background check? Yes No

Have you been convicted of a crime? Yes No If yes, please explain: _____

NAME: _____

For Nominating Committee Use:

Personal meeting with member of Nominating Committee. Date _____

Reviewed by Nominating Committee. Date _____

Attended a Board meeting. Date _____

Action taken by Nominating Committee: _____