



BOARD OF DIRECTORS APPLICATION

Application Date: _____

Board Applicant Name: _____

Home Address: _____

Work Address: _____

HmPhone: _____ Wk Phone: _____ Fax: _____

E-Mail: _____ Cell/Other: _____

Please attach your resume/CV

What is your preferred method of communication? **Phone:** ____ **Text:** ____ **Email:** ____

Please briefly describe your educational and occupational background.

What experience, training or qualifications would you bring to this particular Board?

What specific contribution do you hope to make?

References

Full Name: _____ Phone #: _____ Email: _____

Full Name: _____ Phone #: _____ Email: _____

Full Name: _____ Phone #: _____ Email: _____

By signing this application you are agreeing that the statements made above are true and accurate to the best of of your knowledge. You are also consenting to having references checked in accordance with our board member application process.

Printed Name: _____

Signature : _____ Date: _____

Please email your completed applicaiton and materials to governance@jaspermountain.org

1