



ATF BLACK BELT BOARD OF DIRECTORS

Candidate Application/Renewal

Name _____ Date _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Email Address _____ Website _____

Current Occupation _____

Current or Past Office(s) with ATF BBB _____

Desired Position (indicate renewal or new position) _____

Areas of Expertise (please check all that apply)

____ Business/Corporate

____ Human Resources/Facility Operations

____ Education/Training

____ Legal/Ethical/Spiritual

____ Financial/Fundraising

____ Public Relations/Marketing

____ Health/Fitness

____ Non-Profit management

____ Government

____ Technical/Electrical/Web

____ Public Speaking

____ Event Management

____ Organizational/Management

____ Medical/Emergency Service

Other areas of expertise/skills: _____

How did you learn of our organization/BBB? _____

Current Relationship(S) to ATF? _____

Education/Training/Certificates _____

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

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

Any other special Skills, Experience and Interests you would like us to consider?

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

Please tell us anything else you'd like to share that will be valuable to your service.

Special Interests/Hobbies

What areas/Positions of the ATF Black Belt Board are of interest to you?

How will being an ATF Black Belt Board member be good for you personally?

From our experience, Board Members spend a minimum of 2 - 4 hours per month on BBB specific work. Depending on your office, special events, and assigned tasks, this time might increase periodically. Will you commit to this level of involvement?

Anything we need to know about your time commitment ability?

Date of availability for Board Service_____

Please supply two references: At least one should be from someone with whom you have worked in a Martial Arts Instructing/Board capacity. (Note: References will not be contacted unless applying for a new Board Position).

1. Name:_____

Address: _____

Telephone #(s):_____

2. Name:_____

Address: _____

Telephone #(s):_____

Acknowledge of Nomination/Renewal:

I allow my name to stand for nomination to the ATF Black Belt Board of Directors.

I am willing to commit my time, energy and passion to the heart and legacy of our founder Kwan Jang Nim Fred Weeks.

I understand that I am not guaranteed a position on this board. That my position must be renewed each year. And that I agree to receive instructions, guidance, and assignments from the board leaders. Also I agree to peacefully surrender, vacate, and follow protocols of transition if the Chairman asks me to surrender my position and/or if I decide to resign.

_____ **Signature**

_____ **Date**