



Board of Directors

APPLICATION FOR BOARD MEMBERSHIP

Name: _____ **Email:** _____

Phone Contact(s) Work/Home: _____ **Cell:** _____

Preferred form(s) of contact: work/home phone _____ cell _____ text _____ email _____

Preferred Mailing Address: _____

Employer/Corporation: _____ **Title:** _____

Date of Birth: _____ **Gender:** _____ **Ethnicity/Race:** _____

Please tell us about your professional background:

Please list other association affiliations or board memberships:

What skills could you bring to this Habitat Affiliate?

- Nonprofit Management
- Finance/Accounting
- Fund Raising
- Human Resources
- Public Relations
- Legal
- Pastor, Priest, Minister
- Social Services
- Manager
- Professor/Teacher
- Government/Military
- Banking
- Construction
- Science/Medical
- Architecture
- Gov. Relations
- Management Consulting
- Mortgage Finance
- Real Estate
- Other: _____
- Other: _____
- Other: _____

Please let us know why you want to serve as a Board Member of Cheboygan County Habitat?

What is your prime area of interest in working with Habitat?

Are there any potential conflicts of interest that might impact your service on the board?

Please submit completed application to habitatcheboygan@gmail.com.