



Application for Board of Directors

Name _____

Residence _____
Street City Zip Code

Place of
Employment _____
Street City Zip Code

Position: _____

Contact Phone Number _____

Email _____

EMPLOYMENT BACKGROUND

List employment history for the past five years, including positions and titles held.

Do you currently know anyone on the IPC Board of Directors? If so, please provide their names.

Why do you wish to serve on the Illinois Pioneer Coalition board? (Attach additional sheet if necessary)

What specialized skill or expertise would you bring to the Board of Directors? (Attach additional sheet if necessary)

CIVIC ACTIVITIES

List any present or past memberships on committees or commissions, other board involvement and/or participation in community groups or organizations.

Please check off what characteristics pertain to you:

Age: ☐ 20-29 ☐ 30-45 ☐ 46-65 ☐ Over 65

Geographical IL Region: ☐ North ☐ South ☐ East ☐ West
☐ St. Louis Area ☐ Chicagoland

Sector: ☐ Education ☐ Private Practice ☐ Media ☐ Corporate For-Profit
☐ Regulatory ☐ Home Health ☐ Hospice ☐ Community Leader
☐ Resident ☐ Family Member ☐ State ☐ Regional Coalition
☐ Trade Association ☐ Area Agency on Aging ☐ Social Service Agency
☐ Professional Organization ☐ Advocacy
☐ Other: _____

Skill Set ☐ Public Relations ☐ Marketing ☐ Accounting ☐ Personal/HR Skills
☐ Grant Writing ☐ Fiscal Planning ☐ Training ☐ Public Policy
☐ Coalition Building ☐ Research ☐ Graphic Design ☐ Law
☐ Fund Raising ☐ Direct Care ☐ Board Leadership
☐ Other: _____

Please email completed application and resume, if available to: IllinoisPioneer@gmail.com