



VOLUNTEERS IN PROBATION, INC.

9444 Balboa Avenue, Suite 500, San Diego, California 92123-4393
Mailing Address: P.O. Box 881141, San Diego, California 92168
Email address: www.volunteersinprobation.org

858 514-3148
FAX 858 514-3131

BOARD OF DIRECTORS APPLICATION

POSITION APPLYING FOR:

- **COMMUNITY MEMBER:** (Will be required to complete a volunteer background check)
- **DEPARTMENT MEMBER:** (Probation Department employee)

FULL NAME (Last, First, Middle Name): _____

ADDRESS _____ DOB: _____

HOME PHONE: _____ CELL PHONE: _____

COMMUNITY MEMBERS ONLY:

HEIGHT: _____ HAIR: _____ EYES: _____ ETHNICITY: _____ MALE/FEMALE: _____

OCCUPATION: _____ LENGTH OF EMPLOYMENT: _____

COMPANY NAME: _____ JOB TITLE: _____

WORK ADDRESS: _____ WORK PHONE# _____

I understand as a Community Member that I must submit to a background check before approval to be a Board Member.

I understand that as a Board Member I must be present at monthly board meetings. If my lack of attendance is affecting the productivity of the board, my position on the board may be subject to forfeiture.

I have read the Bylaws and understand the expectations and my role as a VIP Board Member.



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FOR DEPARTMENT MEMBERS ONLY:

CLASSIFICATION: _____ WORK ASSIGNMENT & LOCATION _____

MAIL STOP: _____ WORK ADDRESS: _____ MAIN PHONE # _____

DESK NUMBER: _____ WORK CELL PHONE: _____

I understand that as a Board Member I must be present at monthly board meetings. If my lack of attendance to meetings or VIP events is affecting the productivity of the board, my position on the board may be subject to forfeiture.

I have read the Bylaws and understand my role as a VIP Board Member.

I understand that my time as a VIP Board Member is as a volunteer position and most if not all of VIP activities are after hours. If activities are held during normal working hours, I understand that I may be expected to use vacation or comp time and obtain supervisor approval in order to participate.

I have discussed my interest of becoming a VIP Board Member with my Supervisor. Any questions and concerns have been addressed.

Name of direct Supervisor: _____ Telephone # _____

ALL PROSPECTIVE APPLICANTS (COMMUNITY AND DEPARTMENT MEMBERS):

SUPPLEMENTAL APPLICATION

Briefly describe why you would like to become a VIP Board Member:



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What qualities do you bring to the VIP Board?

SUBCOMMITTEE PARTICIPATION IS A VITAL RESPONSIBILITY SHARED BY ALL. PROSPECTIVE BOARD MEMBERS, PLEASE INDICATE WHICH SUBCOMMITTEE(S) YOU MAY BE INTERESTED IN SERVING ON.

(CHECK ALL THAT APPLIES):

- | | | |
|---|---|---|
| <input type="checkbox"/> GOLF COMMITTEE | <input type="checkbox"/> HOLIDAY FOOD & GIFTS | <input type="checkbox"/> SCHOLARSHIPS |
| <input type="checkbox"/> BOWLING TOURNAMENT | <input type="checkbox"/> BYLAWS | <input type="checkbox"/> NOMINATING COMMITTEE |

**** In addition to this application, you will be required to make an appearance at one of the monthly scheduled VIP meetings. Your appearance should be scheduled through the VIP Secretary or President.**

OFFICIAL USE ONLY: Community Member _____

Department Member _____

Application received on _____. Notified by _____ that application was received.

VIP Meeting presentation ____/____/____. Notified by _____ and expected to attend.

VOTES: _____ YES _____ NO

_____ ABSTENTIONS

_____ACCEPTED _____DECLINED

VIP BOARD MEMBER EFFECTIVE AS OF ____/____/____

PROVIDED COPY OF BYLAWS AND MEETING SCHEDULE.