

Board of Directors Application Form

Thank you for your interest in joining the Pennsylvania Citizens for Better Libraries (PCBL) Board of Directors! Use this form to provide useful information about yourself, to ensure the best match between you and PCBL.

Your name:	
Your Home Phone Number:	Cell Number:
Your email address (please write it carefully)	
Briefly describe why you would like to join of	our Board of Directors:
Your current library affiliations (names of the 1	
2	
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4	

Which of your	r skills would you	like to utilize on the Bo	oard? Check t	hose that apply:
□ Board de □ Strategic □ Members		☐ Financial manage☐ Fundraising☐ Community netw		Marketing Institute Planning Technology
Other skill(s)	of yours that you	would like to utilize? _		
		yourself out of your par, interests to cultivate f		he Board, e.g., what types
				rs a month in attendance to et-of-interest in participating
Your signatur	~e:		Date:	
	Please send	l this application, along	; with your res	ume to:
	<u>By mail:</u> PCBL P.O. Box Pittsburgl	12822 1, PA 15241	By email pcblpa@	<u>:</u> gmail.com