



*Board of Directors' Application*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Professional Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Interests/Hobbies: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Recent Volunteer/Board Activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



**The Christopher Kinney Memorial Foundation**  
**HOPE. DIGNITY. EMPOWERMENT.**

**YOUR AVAILABILITY TO SERVE:**

Could you regularly attend board meetings?

Could you actively participate with a standing committee?

Would you contribute financial support to TCKMF?

Would you participate in raising funds?

Would you participate in recruiting new members for TCKMF?

What skills could you contribute to our board? (Please Check)

- ☐ Accounting
- ☐ Investment
- ☐ Human Services
- ☐ Management
- ☐ Public Relations
- ☐ Marketing
- ☐ Fundraising
- ☐ Education

My personal goals to help The Christopher Kinney Memorial Foundation meet its mission are:

**REFERENCES: Please provide two (2) references (list names, addresses, email address if available and phone numbers).**

1.

2.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_