



Board of Directors Candidate Application

Please return this application to:

Tawanda Vanlandingham
idthh@dreamhopehouse.com

Date _____

Name: _____
First MI Last

Residence

Address _____

Phone _____ E-mail _____

Employer

Name _____

Title _____

Address _____

Phone _____ E-mail _____

Type of business or organization _____

Primary service(s) and area/population served _____

Preferred method of contact () Work () Residence

Please list boards and committees that you serve on, or have served on (business, civic, community, fraternal, political, professional, recreational, religious, social).

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Education/Training/Certificates

Optional – Have you received any awards or honors that you'd like to mention?

How do you feel iDream Hope House Inc. would benefit from your involvement on the Board?

Skills, experience and interests (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Finance, accounting | <input type="checkbox"/> Education, instruction |
| <input type="checkbox"/> Personnel, human resources | <input type="checkbox"/> Special events |
| <input type="checkbox"/> Administration, management | <input type="checkbox"/> Grant writing |
| <input type="checkbox"/> Nonprofit experience | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Community service | <input type="checkbox"/> Outreach, advocacy |
| <input type="checkbox"/> Policy development | Other _____ |
| <input type="checkbox"/> Program evaluation | Other _____ |
| <input type="checkbox"/> Public relations, communications | Other _____ |

Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of iDream Hope House Inc.

Please tell us anything else you'd like to share.

Thank you for applying