



A New Dawn AZ Board of Directors Candidate Application

Please return this application to:

Alicia Yaeger-Booth
P.O.Box 23872
Flagstaff, AZ 86002
alicia@anewdawnaz.org
480-285-8368

Name:

_____ / _____ / _____
First Last Preferred name (if different)

Date: ____ / ____ / ____ **Preferred contact address:** Work [] Home []

Home address:

Street 1

Street 2

City State Zip

Phone: (____) ____ - ____ **E-mail:** _____

Employer: _____

Work Address:

Street 1

Street 2

City State Zip

Thank you for applying!



Type of organization: _____

Primary product / service: _____ **Area served:** _____

Position / title: _____

Work Phone: (____) ____ - _____ **Work E-mail:** _____

Please list any boards on which you currently serve or have served on — e.g., recreational community, religious, social, business / professional, political, etc. (Continue on back if needed.)

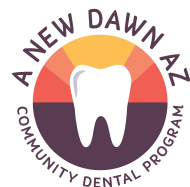
<u>Organization</u>	<u>Role / Title</u>	<u>Dates of Service</u>
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Post-Secondary Education / Training / Certificates:

Awards or honors (optional):

How would A New Dawn AZ benefit from your involvement on the Board?

Thank you for applying!



Skills, experience, and interests (please check all that apply):

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

Organizations / businesses that you could serve as A New Dawn AZ's liaison to:

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

Thank you for applying!