



Board of Directors Candidate Application

Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Preferred telephone: _____

Email address: _____

PROFILE

Employer: _____

Title: _____

Higher Education and/or Training/Certification:

Areas of Expertise (please check all that apply):

- ☐ Accounting
- ☐ Administration/Management
- ☐ Banking/Finance
- ☐ Community Organization
- ☐ Entrepreneurship
- ☐ Facilitation
- ☐ Fundraising
- ☐ Government
- ☐ Grant writing
- ☐ Human Resources
- ☐ Insurance
- ☐ Law

- ☐ Marketing/Advertising
- ☐ Media
- ☐ Medical/Health
- ☐ Non-profits
- ☐ Public Relations
- ☐ Public Speaking
- ☐ Real Estate
- ☐ Strategic Planning
- ☐ Teaching
- ☐ Technology
- ☐ Other: _____

How did you hear about us?

Why would you like to become a member of the ChildSafe Colorado Board of Directors?

Time commitment you can give to this board each month:

Anything else you would like us to know?

BOARD EXPERIENCE

	Agency	Time on BOD	Positions Held
1.	<hr/>		
2.	<hr/>		
3.	<hr/>		

Signature:

Date:

**Please include a resume and two references along with this application.
By submitting this application, you agree to a background check. Thank you for your interest!**

Please send questions and application to Kathleen Baumgardner, kbaumgardner@childsafecolorado.org

**ChildSafe Colorado
2001 S Shields Street Bldg K
Fort Collins CO 80526-1838**