

Application for Membership
IOWA RIVER VALLEY EARLY CHILDHOOD AREA BOARD

Name: _____

Address: _____
Number & Street City State Zip

Telephone Numbers: Home () _____ Cell () _____

E-Mail: _____

Resident of: Marshall County Hardin County Other _____

Where are you employed? What are your primary duties?

What is your prior Nonprofit experience? Elaborate on different local or statewide committees or boards you have served on.

Why do you want to be a member of the Iowa River Valley Early Childhood Board? What can you do to contribute to this board?

If you are selected, which committee are you most interested in?

- Board Administration Fiscal Oversight Quality Evaluation

How did you hear about the Iowa River Valley Early Childhood Board?

- Board Member IRVECA Newsletter Social Media
- Media IRVECA Website Community Presentation

Are you a direct or indirect recipient of Early Childhood Iowa funds or services?

- Yes No Not sure

Return to: Carrie Kube
Early Childhood Iowa Director
PO Box 365
Iowa Falls, IA 50126
iarivervalleyeca@gmail.com
<http://iowarivervalleyeca.com>



"Beginning at birth, every child in Hardin and Marshall County will be physically, mentally, socially and spiritually healthy."