OK W

Siskiyou Opportunity Center

P.O. Box 304 Mount Shasta Ca, 96067 530-926-4698

Board of Directors Candidate Application

Date			
Name			
First	MI	Last	Familiar name
Residence			
Address		-	
Phone		E-mail	
Employer			
Name			
Your title			·
Address			
Phone		E-mail	
Please list boards a	and committee		or have served on (busi
civic, community, frat	ernai, politicai, p	rofessional, recreational	l, religious, social).
Organization	F	Role/Title	Dates of Service
Education/Training	g/Certificates		
Provided by Nonprofit W			

How do you feel the (Siskiyou Opportunity Center) would benefit from your involven on the Board?				
Skills, experience and interests (Please	circle all that apply)			
- inance, accounting	Education, instruction			
Personnel, human resources	Special events			
Administration, management	Grant writing			
Nonprofit experience	Fundraising			
Community service	Outreach, advocacy			
Policy development	Other			
Program evaluation	Other			
Public relations, communications	Other			
Please list any groups, organizations or busing the (Siskiyou Opportunity Center).	nesses that you could serve as a liaison to	on bel		

Thank you very much for applying