

***Bay Community Support Services***  
**PROSPECTIVE BOARD MEMBER INFORMATION SHEET**

Name of prospective board member: \_\_\_\_\_  
Title: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone: Day \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Source of referral/information: \_\_\_\_\_

**Special skills**

- |                                                    |                                                     |
|----------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Fundraising               | <input type="checkbox"/> Marketing/Public Relations |
| <input type="checkbox"/> Personnel/Human Resources | <input type="checkbox"/> Technology                 |
| <input type="checkbox"/> Finances                  | <input type="checkbox"/> Legal                      |
| <input type="checkbox"/> Business                  | <input type="checkbox"/> Other: _____               |

**Professional background**

- |                                              |                                                 |
|----------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> For-profit business | <input type="checkbox"/> Nonprofit organization |
| <input type="checkbox"/> Government          | <input type="checkbox"/> Other: _____           |

**Education**

- |                                                       |                                                   |
|-------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Some high school             | <input type="checkbox"/> Some graduate coursework |
| <input type="checkbox"/> High school graduate         | <input type="checkbox"/> Graduate degree          |
| <input type="checkbox"/> Some college                 | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Undergraduate college degree |                                                   |

Why would you like to join the Board of BAY-CSS?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other affiliations: \_\_\_\_\_

Other board service: \_\_\_\_\_

Known levels of giving: \_\_\_\_\_

Other pertinent information: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Resume attached : \_\_\_\_\_