



Application to be a YVEDDI Board Member

Purpose: Please share with persons you think may like to be a YVEDDI Board Member. This information will assist with member selection going forward.

Name							
Home Address							
Phone:	Home		Work		Cell		
Date of Birth			Race/Ethnic		Disability		
Email Address							
Employer							
Occupation/Position							
Name of Public Official or Organization you Represent:							
Other Boards You Have Serve On or Have served on in the Past Five (5) Years and Positions Held:							
Board			Position			Years of Service	
Volunteer Activities							
Do you have a background or expertise in: If yes, please describe background and/or expertise.							
Fiscal Management or Accounting							
Early Childhood Education and Development							
Education (other than Early Childhood)							
Business Administration							
Community Affairs							
Elder Services							
Health Services							
Housing							
Fundraising							
Other							

Are you a licensed attorney? <input type="checkbox"/> Yes <input type="checkbox"/> No
Please describe areas of law in which you practice or with which you are familiar, including issues that come before the Board:
Why are you interested in serving on the YVEDDI Board?
Do you have any family members, or any entities with which you are associated, employed with YVEDDI? If yes, please describe below:

Print Name

Signature

Date