



## BOARD OF DIRECTORS APPLICATION

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### ***Personal Information***

<b>Name</b>	
<b>Home address</b>	
<b>Telephone</b>	Home: Work: Mobile/Cell:
<b>Email Address</b>	

In case of emergency, whom should we contact?

Name:

Telephone:

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### ***Employment/Professional History*** (Please list beginning with most recent for the last five years)

<b>Business/Employer</b>	
<b>Dates of Employment (MM/YY)</b>	
<b>Address</b>	
<b>Telephone</b>	
<b>Position Title</b>	
<b>Brief description of responsibilities</b>	

May we contact you at your current place of work? Yes\_\_\_\_ No \_\_\_\_

<b>Business/Employer</b>	
<b>Dates of Employment (MM/YY)</b>	
<b>Address</b>	
<b>Telephone</b>	
<b>Position Title</b>	
<b>Brief description of responsibilities</b>	

<b>Business/Employer</b>	
<b>Dates of Employment (MM/YY)</b>	
<b>Address</b>	
<b>Telephone</b>	
<b>Position Title</b>	
<b>Brief description of responsibilities</b>	

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***Volunteer History*** (Please list beginning with most recent for at least the last 5 years)

<b>Organization Name:</b>	
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<b>Address:</b>	
<b>Position and Responsibilities:</b>	
<b>Supervisor's Name and Title:</b>	
<b>Telephone:</b>	
<b>Dates of Service:</b>	

<b>Organization Name:</b>	
<b>Address:</b>	
<b>Position and Responsibilities:</b>	
<b>Supervisor's Name and Title:</b>	
<b>Telephone:</b>	
<b>Dates of Service:</b>	

<b>Organization Name:</b>	
<b>Address:</b>	
<b>Position and Responsibilities:</b>	
<b>Supervisor's Name and Title:</b>	
<b>Telephone:</b>	
<b>Dates of Service:</b>	

Have you ever been asked to relinquish a volunteer position?

If yes, please explain: \_\_\_\_\_

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***Personal Statement***

Why are you interested in serving on the Board of Directors?

What assets, skill sets, and experience will you bring to this board?

Do you have any family members who have special needs/a disability? This could include: childhood chronic illness; behavioral health needs; or educational needs that have required targeted interventions by the school. If so, please just state yes (and let us know if we can help you in any way), and write down the relationship.

Yes \_\_\_\_\_ No \_\_\_\_\_ Relationship:

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### ***Personal References***

Please provide three non-family references:

Name:  
Address:  
Telephone: Relationship:  
Email:

Name:  
Address:  
Telephone: Relationship:  
Email:

Name:  
Address:  
Telephone: Relationship:  
Email:

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I have completed and reviewed this entire form and attest that the information provided is true. I understand I will be subject to a criminal background check if accepted for this position.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return application, criminal background check agreement, a copy of resume, and a brief bio to:**

**Vermont Family Network  
600 Blair Park Road, Suite 240  
Williston, VT 05495  
(802) 876-5315**



## **Confidentiality/Conflict of Interest Agreement**

I agree to treat confidentially all information discussed in the course of my participation as a board member of the Vermont Family Network.

I agree to notify board members (during a meeting) of any conflict between my personal interests and the interests of Vermont Family Network as soon as the conflict becomes apparent.

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Signature of Board Member

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Date