



Board Member Application

Thank you for your interest in serving on the Board of Northwest Ohio Community Shares. Those wishing to serve should have a vested interest in Community Shares and our member agencies.

PERSONAL INFORMATION	
Name	
Mailing Address	
City, State Zip Code	
Telephone (Home)	
Telephone (Business)	
Telephone (Cell)	
Email Address	
Organization/Business Affiliation	
Position Title	

_____ I understand that as a Board member I am to be an active member of a committee.

_____ I understand that if I fail to attend three (3) consecutive meetings of the Board, I shall be asked to resign.

_____ I understand that as a Board member I may be asked to serve as an officer of the Board.

_____ I understand that as a Board member I will be a financial supporter of Community Shares.

_____ I have attached a resume or curriculum vitae to this application.

Applicant Signature	Date
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Completed application forms must be submitted (mail or email) to:

Northwest Ohio Community Shares
2413 Collingwood Blvd., #105
Toledo, OH 43620
director@nwohioshares.org

Your application will be forwarded to our Governance Committee. A member of the Governance committee will contact you. If you have any questions, please call (419) 243-6637