

## **Application for Board Member**

Last Name:	First Name:	MI:					
Street Address:							
City:	State:						
Length of Residence in Listed City: _		Occupation:					
Telephone:	Alt. Telephone:						
Email Address:							
Educational Background:							
School/College Attended	Dates Attended	Area of Study	Degree Earned (i.e., Diploma, B.A.)				
Experience: Please list any volunteer and/or life	experience that you have	that will contribute to your	role as a board member				
Have you ever been involved with a	sexual assault or domesti	c violence program? It so, ii	n wnat capacity?				
Have you ever been involved with a	nonprofit agency before?	If so, in what capacity?					

					ADM	
Have you ever been on the board for SAAFE House? If so, when and in what capacity?						
Have you ever been employed by SAAFE House? If so, when and	in wl	hat capacity?				
Availability:						
/ill you be able to fulfill your three-year board term as you know it now?				No		
Vill you be able to attend Board meetings on a monthly basis?				No		
Vill your schedule allow you to attend occasional unexpected Board meetings?				No		
Vill you be able to attend mandatory board training?				No		
Vill you be able to participate in agency fundraisers?	Yes	No				
Vhat commitments (work, volunteer, family, etc.) might interfer	e wit	th your role as a	Board M	ember?		
rea(s) of Interest (Mark all that Apply):						
□ Personnel Committee	☐ Administration Co					
☐ Executive Committee	☐ Strategic Plann		_	ing Committee		
		Finance/Audit	inations Committee			
☐ Resale/Fundraising Committee		Nominations	Committe	e		
Personal Viewpoints	)					
Why do you want to serve as a Board member for SAAFE House?						

What is your definition of domestic violence?

A	ADM2
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What do you feel are the prevailing societal attitudes regarding victims of family violence and sexual assault?	_
	_
What are your personal attitudes toward victims of family violence and sexual assault?	_
	_
Criminal History Have you ever been convicted of a law violation (other than routine traffic violations)? Yes No If yes, please explain:	_
	_
Are you currently on deferred adjudication, probation, or under the supervision of a court? Yes No If yes, please explain:	
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	_
I understand that Board members are required to maintain confidentiality at all times, during and after their assignments. I understand that the misrepresentation of information provided through this application is cause f termination of my volunteer services.	
By signing below, I attest that all questions have been answered accurately and truthfully. I authorize SAAFE Ho conduct a criminal background check and consent to the investigation of all statements made in this application.	ouse to

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

Signature: