Board of Directors Application Form

Please complete this form and submit it, along with a copy of your resume, to: westgatechildcenterboard@gmail.com.

| First Name |  |
| --- | --- |
| Last Name |  |
| Address |  |
| City/State/Zip |  |
| Home Phone |  | Cell Phone |  |
| Email |  |
| Please explain your interest in joining the Westgate Board of Directors: |  |
| I am currently a parent/guardian of a child(ren) in the following class(es): |  ⬜ Sunshine Room ⬜ Rainbow Room | ⬜ Lightning Bolts⬜ Little Leaguers | ⬜ N/A |
| I can bring some of the following skills to the Board: |
| ⬜ | Financial/auditing background |
| ⬜ | Education/teaching experience |
| ⬜ | Fundraising |
| ⬜ | Social networking/advertising (facebook, etc.) |
| ⬜ | Human resources/compliance |
| ⬜ | Website design/updating |
| ⬜ | Communications |
| ⬜ | Other: |  |
| By submitting this application, I agree to the requirements of being a Director on the Westgate Child Center Board of Directors.  |