

TOP Community Development Application - Committee Members

Fill the form below accurately

Personal Information

Please complete all fields.

Name *

First Name

Last Name

Phone Number *

Email

example@example.com

Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Professional Background

Only most current employer is required

Current Employer *

Position/Title *

How long have you been with your current employer? *

Please provide a brief description of your professional background and expertise: *

Skills and Experience

If none, please check OTHER

Please check all areas in which you have experience or expertise: *

- NonProfit Management
- Fundraising
- Accounting
- Legal
- Marketing/Communication
- Public Relations/Networking
- Human Resources
- Project Management
- Operations/Planning
- Volunteer Management
- Volunteer
- Other

Please describe any previous board or committee experience:

Commitment to TOP Community Development

Why are you interested in serving on the board committee of TOP Community Development? *

What do you hope to contribute to the board committee? *

What do you hope to gain from your experience as a board committee member? *

Are you able to commit to attending quarterly board meetings and participating in committee work? (Meetings can be attended virtually)

Yes

No

References

Please list two (2) references that are familiar with you professionally and/or personally.

Additional Information

Please provide any additional information or comments you feel are relevant to your application