

Board of Directors Candidate Application

Date:			
Name:			
Home:			
Address:			
Phone:			
Email:			
Employer:			
Name:			
Title:			
Address:			
Phone:			
Email:			
Type of Business or organization			
Main service(s) and area/population served			
Preferred method of contact:	Work	Residence	
Please list boards and commit professional):	tees that you se	erve on, or have served	on (business, civic, commun
Organization	Role		Dates of Service



Board of Directors Candidate Application

Finance, accounting Personnel, human resources Administration, management Check all that apply) Program evaluation Public relations, communication Education, instruction	
Personnel, human resources Public relations, communication	
Administration, management Education, instruction	ons
Nonprofit experience Special events	
Community service Grant writing	
Policy development Other	
Fundraising Other	
Outreach, advocacy Other	
ease list any connections with community groups or businesses that you could serve	as a liais





Please email completed application to:

info@onekinroof.org

You can print your application and mail to:

One Kin Roof 120 104th Avenue #172 Treasure Island, FL 33706

Thank you for applying to One Kin Roof's Board of Directors. We will review your application and contact you with next steps.

Dr. Karen Berkman President One Kin Roof Board of Directors