



BOARD APPLICATION

Name: _____ Date: _____

Title: _____ Organization: _____

Length of time in that position: _____ Email: _____

Work address:

Work Phone: _____ Cell Phone: _____

Areas of Interest/Expertise: (Mark all appropriate items)

- | | |
|--|--|
| <input type="checkbox"/> Collaborative Partnerships | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Strategic Planning | <input type="checkbox"/> Economic Development |
| <input type="checkbox"/> Governance & Organizational Structure | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> PR & Communications |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Program planning / Events |
| <input type="checkbox"/> Financial | <input type="checkbox"/> Other |

Demographic Information

OAA uses this information to gauge its effectiveness in recruiting a diverse group of volunteers.

Gender:

- ☐ Male
☐ Female
☐ Prefer not to say

Ethnicity/Race

Please identify your racial, ethnic and/or cultural background, if comfortable.

<input type="checkbox"/> White / Caucasian <input type="checkbox"/> Hispanic / Latino <input type="checkbox"/> Black / African American <input type="checkbox"/> Native American / <input type="checkbox"/> American Indian	<input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Prefer to self-describe _____
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Age Range

☐ 25-34 years old

☐ 55-64 years old

☐ 35-44 years old

☐ Over 65

☐ 45-54 years old

Education

☐ High school degree or equivalent

☐ Doctorate

☐ Bachelor's degree (BA, BS...)

☐ Other _____

☐ Master's degree (MS, MA, MEd...)

Other affiliations:

Other boards



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1. Please describe your professional role and how it relates to OAA and supporting the organization.

2. Please describe your prior involvement or interests with the organization?

3. What is or has been your involvement in the OAA?

4. Please describe the goals and objectives you would like to accomplish as a member of the organization's Board.

5. Please include other information that is relevant to serving on the Board.

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- ☐ I acknowledge that as a Board Member I will attend a minimum of 8 Board Meetings per year in person.

 - ☐ I acknowledge that as a Board Member I may be assigned to be a Lead or Member of a Committee or Working Group as needed.

 - ☐ I acknowledge that as a Board Member I may be asked to volunteer up to 5 hours per month of my time to any of the above types of meetings or events in the corridor.