

Prospective Board Member Application

Date:			
Name:			
First	MI	Last	
Residence:			
Street Address			
Phone	Ema	ail	
Employer/ Retired Fron	1 :		
Name		Your Title	
Address			
Type of business or orga	nization		
How do you feel The Na Board?	atale Foundation woul	ld benefit from your invo	olvement on the

Skills, experiences and interests (please mark all that apply)				
Finance/ Accounting Personal policy/ Management Law/ Non-Profit Law Fundraising Program Evaluation Social Media	Public Relations/ Communications Grant Writing Federal/ State/ County Government Outreach advocacy Community Resources Other:			
Please list boards or committees that (business, civic, community, fraternal, poorganization	you serve on or have served on Dilitical, professional, recreational religious, social etc) Role/ Title Dates of Service			
Please list any groups, organizations on behalf of The Natale Foundation.	or businesses that you could serve as a liaison to			
Please tell us anything else you'd like	to share!			



Thank you for applying!
Please submit applications via email to natalefoundation@gmail.com