

Board of Directors Application Crossing Arts

Name:	Home Phone:
Occupation:	Work Phone:
Address:	
Email address:	Cell Phone:

YOUR BACKGROUND

What strengths or skills could you contribute to the Crossing Arts Board? (Please circle all that apply)

- Arts Background (in any form)
- Accounting/financial •
- Legal
- Fundraising •
- Public relations, Social media, Communications
- ٠ Strategic Thinker
- Management/Leadership
- **Community Development**

- Nonprofit Management
- Grant seeking expertise
- Human Resources
- Innovative approaches
- Training & consulting •
- Program Development/Evaluation •
- Public Policy
 - Other: _____

Have you served on other nonprofit boards? Please list:

Charitable or community activities in which you are or have been involved:

What attracts you to serve on the Crossing Arts Board?

What is your understanding of the mission of this organization?

The board meets 10-12 times per year (generally third Thursday of each month) and Board Committees (ad hoc and standing) meet 6-10 times per year (scheduled as needed). Are you able to make a commitment to regular attendance at board meetings and at least one committee assignment?

____ No Please share scheduling conflicts or barriers: ____Yes

I have read The Crossing Arts Alliance board position description and by-laws. I agree to abide by these documents, 501c3 fiduciary requirements, and understand that the first term is three years. I authorize the use of my name, phone number and email address in private and public announcements for Crossing Arts.

Signature: _____ Date: _____