Building Business
Cultivating Opportunity

FRANKLINCOUNTY
DEVELOPMENT ASSOCIATION

Board of Directors Application Form

1. Candidate Name: _____

   Home Address: _____

   Phone: _____ Email:_____

   Preferred Method of Contact: _____

2. Current Position and Employer: _____

3. Please describe your relevant experience and/or employment. You may also attach a resume.

4. Please describe the area (s) of expertise/contribution that you feel you can make to further the mission of the FCDA:

5. Please list prior experience as serving as a board member for other non-profit organizations:

6. What other volunteer commitments do you currently have?

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7. The FCDA Board of Directors meets on the third Thursday of every month at 8:00 a.m. The meetings generally last about one (1) hour. Do you have any standing commitments that create a scheduling conflict for you?

8. Why are you interested in serving as a board member for FCDA?

9. Please share any other information you feel that is important for consideration of your application as an FCDA board member.