



1671 Main St
Ferndale, WA 98248
360.384.1506
Director@FerndaleFoodBank.org

BOARD MEMBER APPLICATION

The following information may be released to finding agencies or other public bodies, as requested only after your board membership has been confirmed.

NAME

EMPLOYER

POSITION/TITLE

Work Address

Phone ()

Fax ()

Email

Home Address

Phone ()

Fax ()

Email

Please Contact me at Home () Work ()

As a Ferndale Food Bank Board Member, I will represent

- () Myself
- () The business/organization I work for
- () The following groups/organizations that I am affiliated with on a volunteer basis

Please list all affiliations you bring to this Board

_____	_____
_____	_____

1. Why do you want to be part of the Ferndale Food Bank?

2. Describe your board and volunteer experience as well as any professional experience you feel is relevant.

3. Do you have skills in any of the following areas that you are willing to contribute to the Food Bank?

- Non-profit management
- Program or event planning
- Evaluation or measurement of outcomes
- Public relations or community outreach
- Fundraising/resource development
- Financial management
- Connections within the Ferndale community
- Other – Please describe _____

4. Is there anything else you would like us to know?

REFERENCES

Name
Company/Organization
Relationship

Title
Phone

Name
Company/Organization
Relationship

Title
Phone

Applicant's Signature

Date