Board of Directors

Questionnaire

|  |  |
| --- | --- |
| Date: | Email: |
| Name: | Home Phone: |
| Address: | Work Phone: |
| City / Zip: | Cell Phone: |
| Referred by: | Fax: |

What is the best way to contact you?  Home Phone  Work Phone  Cell Phone  Email

1. How did you first hear about Career Transitions (CT) and what draws you to the mission of CT?
2. Why do you want to serve on CT’s Board?
3. Please provide us with a brief description of your background.
4. We are very interested in ensuring that our Board of Directors is an effective group, with a broad background of skills and experience. Please tell us what experience or expertise (E) or what specific interests (I) you have.

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| --- | --- | --- | --- | --- | --- |
| E | I |  | E | I |  |
|  |  | Audit/Accounting |  |  | Management |
|  |  | Business Owner |  |  | Marketing |
|  |  | Clients |  |  | Media |
|  |  | Communications |  |  | Nonprofit/Philanthropy |
|  |  | Education/Academic |  |  | Operations |
|  |  | Event Planning |  |  | Public Relations |
|  |  | Finance/Investments |  |  | Real Estate |
|  |  | Fundraising |  |  | Sales |
|  |  | Government |  |  | Social Services |
|  |  | Grant Writing |  |  | Strategic Planning |
|  |  | Healthcare |  |  | Volunteer Experience |
|  |  | Human Resources |  |  | Workforce Development |
|  |  | Legal/Law |  |  | Other |

1. What other Boards (profit or non-profit) have you served on, and in what capacity?
2. In what other charitable or community activities have you been involved?
3. Do you have a minimum of two hours every month to do Board work outside of meetings?  Yes  No
4. Are you willing to volunteer at CT events when needed?  Yes  No
5. Is there anything else that you would like the organization to know or to evaluate in considering your candidacy as a Board Member of CT?

**Thank you for completing this questionnaire. Please attach your resume/CV.**