APPLICATION FOR
LEADER OF NEW DEVELOPMENT COMMITTEE

Name: _____
First Last

E-mail: _____

Mailing address: _____

_____
City State Zip

Phone: _____

Background relating to non-profit 501(c)3:

_____
_____
_____
_____

Fundraising experience:

_____
_____

References:

_____
_____
_____

Grant Writing Experience:

_____

Can attend Board Meetings one evening a month: [ ] Yes [ ] No
If no explain: _____

Hours available monthly to volunteer: _____