



## Gulfport Senior Center Foundation Board of Directors Application Form

Thank you for your interest in joining the Gulfport Senior Center Foundation Board of Directors.

Board members will serve a term of three (3) years and are eligible for re-election at the end of their term. Board members are eligible to serve a maximum of two (2) consecutive terms of three (3) years each. Board members must possess a current membership in the Foundation. Board members are required to serve on at least one committee and participation in events of the Foundation is required. Committees usually meet monthly, or as Foundation needs require. Please submit your completed application online, if possible, along with a resume or cover letter telling us about you and why you wish to be on the Board.

Your **N**ame: \_\_\_\_\_

Your Home Phone Number: \_\_\_\_\_ Cell number: \_\_\_\_\_

Your address: \_\_\_\_\_  
\_\_\_\_\_

Your email address (please write it carefully):  
\_\_\_\_\_

Briefly describe why you would like to join our Board of Directors:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your current organizational affiliations (names of the organization and your role(s)):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Which committees would you like to join? Check those that apply:

Budget & Financial Review

Events

Celebration Wall/Brick Project

Membership & Public Relations

Grants

Skill(s) that you would like to utilize? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What would you like to get for yourself out of your participation on the Board, e.g., what types of experiences, skills to develop, interests to cultivate for you, etc.?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you join the Board, you agree to be on at least one committee, that you can provide at least 2-4 hours a month in attendance to Board and Committee meetings, and attend and volunteer at Foundation events as much as possible. You also agree that you do not have any conflict-of-interest in participating on the Board.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you are not selected as a member of the Board, or if you decide not to join, would you like to be a volunteer to assist our organization in various ways that match your skills and interests?

Yes

No

Maybe