TRI-COUNTY UNITED WAY

Serving Menominee, Marinette, and Oconto Counties

Application for Board Membership

Name: _____

Home Address: _____
City: _____ **State:** _____ **Zip:** _____ **County:** _____

Personal Email: _____
Personal Phone: _____

Employer: _____
Title: _____ **# of Years:** _____

Work Email: _____
Work Phone: _____

Interest in Board Service

Why are you interested in serving on the Tri-County United Way Board of Directors?

_____
_____
_____
_____

What community issues are you most passionate about?

_____
_____
_____
_____

What unique perspective, experience, or expertise would you bring to the Board?

_____
_____
_____
_____

How many hours are you able to dedicate to United Way per month? 2 4 6 8 Other _____

Previous Board Experience

Boards Currently Serving

_____

_____

_____

Previous Boards Including Year(s) You Served

_____

_____

_____

Previous United Way Experience

Name of United Way: _____

Position: _____ Length of Service: _____

Community Involvement Please list current or recent volunteer, nonprofit, civic, professional, faith-based, or community organizations in which you have been involved.

Current: _____

_____

_____

Past: _____

_____

_____

_____

Community Connections Describe the networks, relationships, or community connections you could leverage to help Tri-County United Way advance its mission.

_____

_____

_____

_____

Skills and Expertise Please identify areas where you can contribute to the work of Tri-County United Way.

☐ Strategic Planning ☐ Financial Management / Accounting ☐ Fundraising / Development
☐ Human Resources ☐ Marketing / Communications ☐ Public Relations ☐ Legal
☐ Community Engagement ☐ Government Relations / Advocacy ☐ Technology
☐ Health & Human Services ☐ Business Leadership ☐ Diversity, Equity & Inclusion
☐ Other: _____

Philanthropy and Resource Development

Describe any experience you have with fundraising, donor development, sponsorships, relationship building, or community campaigns.

_____
_____
_____
_____

Any Additional Comments

_____
_____
_____
_____

References

Please be prepared to provide two references upon request. References may not be relatives.

Reference #1	**Reference #2**
Name: _____	Name: _____
Organization: _____	Organization: _____
Relationship: _____	Relationship: _____
Phone/Email: _____	Phone/Email: _____

Applicant Certification

I understand the responsibilities and expectations of Board service as outlined in the Board Member Job Description and the Count Me In Commitment. I certify that the information provided on this application is accurate to the best of my knowledge.

Signature: _____ Date: _____

Thank you for your interest in joining the Tri-County United Way Board of Directors!
Please return this application & a resume to: executivedirector@tcunitedway.org.