

Board of Directors Application Form

CONTACT INFORMATION

First Name: _____ Middle Initial: _____ Last Name: _____

Home Address: _____ Apartment/Unit: _____

City: _____ State: _____ ZIP Code: _____

Preferred Phone Number for CAP-HC Communications: _____

Choose One: Home Work Mobile

Preferred Email Address for CAP-HC Communications: _____

Choose One: Home Work

CURRENT EMPLOYMENT INFORMATION

Company: _____ Years with Company: _____

Job Title: _____

Your Work Address: _____ Apartment/Unit: _____

City: _____ State: _____ ZIP Code: _____

Optional – You may submit your resumé with this application form.

EDUCATION

Education, Affiliations, Trainings, and Certifications

Continues

VOLUNTEER EXPERIENCE

Organization(s)	Role(s)	Dates of Service

Please list any other boards and/or committees on which you currently or have previously served.

Organization(s)	Role(s)	Dates of Service

CAP-HC INTEREST

Why are you interested in serving on CAP-HC's Board of Directors?

Do you have any experience with issues that impact people with low incomes?

Each CAP-HC board member serves on a Board Committee. Please indicate at least one of the following committees on which you'd be willing to serve.

<input type="checkbox"/> Finance and Audit Committee	<input type="checkbox"/> Human Resources Committee
<input type="checkbox"/> Program Planning and Evaluation Committee	<input type="checkbox"/> Fund Development Committee
<input type="checkbox"/> Bylaws and Governance Committee	

If not already stated above, please list any additional skills, experience, and knowledge you would bring to CAP-HC's Board of Directors.



FOR PRIVATE SECTOR CANDIDATES ONLY

The Private Sector of CAP-HC's Board of Directors includes representatives from different fields, racial and ethnic groups, historically underrepresented groups, and other private groups with interests in the community at large, whose mission and/or purpose is compatible with CAP-HC's goals. These groups and interests will be identified and selected by the Board to ensure an ongoing and effective mechanism for securing broad and diverse Private Sector involvement.

Please list your field in the private sector: _____

FOR COMMUNITY SECTOR CANDIDATES ONLY

The Community Sector of CAP-HC's Board of Directors includes representatives that reflect the community CAP-HC serves and other community groups whose mission and/or purpose is compatible with CAP-HC's goals. These groups and interests will be identified and selected by the Board to ensure an ongoing and effective mechanism for securing broad and diverse Community Sector involvement.

Do either of the following apply to you?

- I am eligible for energy assistance, subsidized housing, WIC, food stamps, or other supplemental assistance.
- My household meets one of the income guidelines below:

Household Size	Maximum Annual Gross Household Income*
1	\$31,920
2	\$43,280
3	\$54,640
4	\$66,000
5	\$77,360
6	\$88,720
7	\$100,080
8	\$111,440

*Gross income – total earnings before taxes and other deductions

If you have a household of 9 or more people, call 952-933-9639 for income eligibility information.

SIGNATURE

- I certify that my answers are true and complete to the best of my knowledge.
- I am providing my signature electronically by typing my first and last name below.

Signature: _____ Date: _____

Please send completed applications, and resumé if opting to include one, to CAP-HC in one of the following ways:

- **Email:** jmclaughlin@caphennepin.org
- **Mail:** Community Action Partnership of Hennepin County
Attn: Jalynn McLaughlin
7101 Northland Circle N, Suite 123
Brooklyn Park, MN 55428

