



**South Essex Community Council
Board of Directors**

Application and Member Profile

Name:	
Address:	
Telephone: Home () _____ - _____	Business () _____ - _____
Email:	Cell Phone: () _____ - _____
Date of Birth:	
How did you learn about South Essex Community Council?	
Why are interested in serving on the SECC Board of Directors?	
EMPLOYMENT	
Current Employer _____	
Position _____ Years Employed _____	
Previous Employer _____	
Position _____ Years Employed _____	

EDUCATION		
Degree/Diploma/Certification _____		
School/Institution _____		Year _____
Degree/Diploma/Certification _____		
School/Institution _____		Year _____
COMMUNITY PARTICIPATION		
Please list other organizations with whom you are involved and list the type of activity/involvement (e.g. Rotary Club, Board member).		
SKILLS		
Please check all that apply		
<input type="checkbox"/> Finance	<input type="checkbox"/> Regulatory	<input type="checkbox"/> Risk Management
<input type="checkbox"/> Strategic Planning	<input type="checkbox"/> Governance	<input type="checkbox"/> Business
<input type="checkbox"/> Legal	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Marketing
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Social Services	<input type="checkbox"/> Education
<input type="checkbox"/> Grant Writing	<input type="checkbox"/> Not-for-Profit	<input type="checkbox"/> Organizational Management

I understand that the information provided in this application is accurate and that falsification of information is grounds for disqualification as an applicant.

I understand that the information provided in this application will be held and stored in accordance with SECC's Privacy and Protection of Personal Information policies.

Signature

Date