Challenger Learning Center of Orleans, Niagara and Erie Counties

mail: 210 Walnut Street Lockport, New York Location: 160 Washburn Street, (716) 434 3196

Board of Directors Candidate Application

Date				
Name				
	First	MI	Last	Familiar name
Address				
hone		E-mail		
Employer				
Name/Title_				
Address				
Phone			E-mail	
Type of busin	ness or organiza	ation		
Primary serv	rice(s) and area	/population served		
Preferred me	ethod of contact	() Work ()	Residence	
		nmittees that you seal, professional, recre		served on (business, ci social).
Organization	1	Role/Title	Date	es of Service
Education/T	raining/Certific	cates		

Optional – Have you received any awards or	honors that you'd like to mention?
Committee assignments (Please check all t □ Education and technology □ Marketing and Public Relations □ Fundraising, Finance and Budget	hat apply)
☐ Operations and Staffing How do you feel CLC of ONE would benefit fr	om your involvement on the Board?
Please list any groups, organizations or busing half of CLC of ONE .	esses that you could serve as a liaison to on be
Skills, experience and interests (Please ch	eck all that apply)
Finance, accounting	Administration, management

Public relations/communication	าร				
Outreach, advocacy					
Made to a Consider sector					
Marketing/ Special events					
Grant writing/ Fundraising					

	Nonprofit experience	Other				
Please tell us anything else you'd like to share.						

Thank you for your interest