

Board Application

Youth Philanthropy Initiative of Johnson County

Board Member Profile

Name: _____ Date: _____

Home Address: _____

City: _____ State: _____ Zip: _____

School: _____

Employer: _____

Title/ Job Description: _____

Work Address: _____

Home Phone: _____ Email: _____

Work Phone: _____ Fax: _____

Date of Birth: _____ Gender: _____ Are you a Johnson County Resident?

Race/Ethnic Background: _____
Yes No

Please list present or previous boards, committees, and/or clubs you have served on:

Boards- Past/Present	Activities/Committees/Clubs/Projects

Areas of Interest (Check all that apply):

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Health Issues | <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Recreation/Sports | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Education | <input type="checkbox"/> Day Care | <input type="checkbox"/> Community Development | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Youth | <input type="checkbox"/> Substance Abuse | <input type="checkbox"/> Parks |
| <input type="checkbox"/> Government | <input type="checkbox"/> Music/Arts | <input type="checkbox"/> Community Service | <input type="checkbox"/> Board Development |

Areas of Expertise:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Finance | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Leadership | <input type="checkbox"/> Special Events | <input type="checkbox"/> Media | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Legal | <input type="checkbox"/> Organizational Skills | <input type="checkbox"/> Team Building |

Please answer the following questions:

1. What personal attributes do you feel you would bring to the Youth Philanthropy Initiative of Johnson County Action Board?

2. What do you think are the top two issues facing Johnson County residents?

3. As a Board Member of the Youth Philanthropy Initiative of Johnson County how would you work to improve the community?

4. How much time are you prepared to commit to the Youth Philanthropy Initiative of Johnson County Action Board?

5. Tell us about a time that you have assumed a leadership role.

6. Please identify two references listing their full name and contact information.

First and Last Name of Reference	Relationship (Work, Club, School)	Phone Number

In order to apply, please email, fax or mail your application to:

Youth Philanthropy Initiative of Johnson County
Attn: Elesha Jackson-Wooten
Youth Development Coordinator
PO Box 115
Franklin, IN 46131
Phone: (317) 738-3273 ext.104
Fax: (317) 738-0437
youthdevelopment@youthconnections.org

**Please note an interview process may take place depending on the number of applicants.
Thank you for your interest in becoming a Youth Philanthropy Initiative of Johnson County Action Board Member!