



**55 Wilcox Lane
Canandaigua, NY 14424
Phone: (585) 394- 5310
Fax: (585) 394-5207**

BOARD OF DIRECTORS BACKGROUND & SKILLS INVENTORY

☐ Current Member

☐ Prospective Member

Date _____

Name _____ DOB (no year required) _____

Home Address _____

Employer _____

Business Address	Street	City	State	ZIP
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Occupation/Title _____

Union Affiliation _____

Home Phone _____

Business Phone _____

May you be called during business hours? ☐ Yes ☐ No

Availability for Meetings: Please check when available, place a "p" for preferred.

Weekdays: A.M. _____ P.M. _____ Late Afternoon: _____ Noon: _____

Weekends: _____ Weeknights: _____

Current affiliation with Our Children's Place: _____

Affiliations with other organizations:

Special honors or awards:

Please check areas in which you have experience:

- | | |
|---|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Medical expertise |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Music |
| <input type="checkbox"/> Estate Planning | <input type="checkbox"/> Personnel |
| <input type="checkbox"/> Finance/Budget | <input type="checkbox"/> Public Relations/ Media (specify) |
| <input type="checkbox"/> Foreign Language (please list) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Program Development |
| <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Graphic Arts | <input type="checkbox"/> Sports (specify) |
| <input type="checkbox"/> Insurance | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Law | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Speakers Bureau |
| <input type="checkbox"/> Building & Grounds | <input type="checkbox"/> Training (please specify) |
| <input type="checkbox"/> Grant Writing | <input type="checkbox"/> _____ |

Additional Skills:

Would you be willing to volunteer time using any of the skills checked, if you are not already doing so for Our Children's Place ☐ Yes ☐ No

OPTIONAL

Education Level:

- ☐ High School
☐ Associates
☐ Bachelors
☐ Masters
☐ Doctorate
☐ Other

Field _____
Degree _____