



Girls on the Run of Northeast Tennessee, Inc.
P.O. Box 5622, Johnson City, TN 37602
423-677-3595
www.gotrnetn.org

BOARD OF DIRECTORS APPLICATION

NAME: _____ PHONE: (____) _____

ADDRESS: _____

EMAIL: _____ BEST WAY TO CONTACT: _____

WHY ARE YOU INTERESTED IN OUR ORGANIZATION? _____

WHAT AREAS OF EXPERTISE WILL YOU CONTRIBUTE TO OUR BOARD? _____

PLEASE LIST ANY RELEVANT EXPERIENCE AND/OR EMPLOYMENT (ATTACH RESUME IF RELEVANT):

PLEASE LIST ANY OTHER VOLUNTEER/BOARD COMMITMENTS AND SERVICE DATES: _____

ARE YOU WILLING TO MAKE A FINANCIAL GIFT TO OUR ORGANIZATION? _____

===== **For Board Use** =====

- ___ Completed application received on _____
- ___ Nominee has had a personal meeting with either chief executive, board chair, or other board member. Date _____
- ___ Nominee reviewed by the committee. Date _____
- ___ Nominee attended a board meeting. Date _____
- ___ Nominee interviewed by the board. Date _____

Action taken by the board _____