



**CALIFORNIA HUMAN
DEVELOPMENT**
CREATING OPPORTUNITIES
TO END POVERTY

BOARD OF DIRECTORS
APPLICATION FOR MEMBERSHIP ___Public
___Private ___Low-Income (Please check one)

APPLICATION FOR MEMBERSHIP: Feel free to submit additional information and attachments.

Date:

Name:	
Street Address:	
City:	
State, Zip Code:	

Home Phone:		Personal Email:	
Work Phone:		Work Email:	
Mobile:		Work Facsimile:	

STATEMENT OF INTEREST AND QUALIFICATIONS

1. Why are you interested in becoming a CHD Board Member? How did you learn about CHD?

2. Please describe your professional or occupational background. What skills would you contribute to CHD’s mission?

3. Please describe your volunteer activities in support of non-profit agencies.

4. Are you related to a current CHD Board Member or CHD Staff Member?

Yes

No

If yes, please explain:

Please Return Your Application to:

Thomas Stuebner (CEO)
3315 Airway Drive
Santa Rosa, California 95403
707-523-1155 ext 4739
Thomas.Stuebner@cahumandevlopment.org