

# Mondays Associate Board Member Application



mondays at  
**racine**<sup>™</sup>  
*changing the face of cancer one monday at a time.*

Please forward all completed applications by email to [mondays@mondaysatracine.org](mailto:mondays@mondaysatracine.org).

## CONTACT

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

## EMPLOYMENT

Place of Work/Current Employer: \_\_\_\_\_ Position Title: \_\_\_\_\_  
May we contact you at work?  Yes  No Work Phone: \_\_\_\_\_  
Industry/Business Type: \_\_\_\_\_

*\*Please attach a current resume.*

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Have you had cancer or a personal connection with a person who had cancer?  Yes  No  
*If yes, please briefly share your experience with us (types, dates, treatment).*

---

---

---

---

Please tell us about your qualifications and why you wish to be on the Mondays Associate Board.

---

---

---

---

Do you have previous Board Experience?  Yes  No

*If yes, please explain your previous board experience (organization, dates of service, offices held, etc.)*

---

---

## VOLUNTEER HISTORY

Please describe any previous volunteer experiences you have had:

(Name of organization, type, role, dates of service, etc.)

---

---

---

## WHAT PRINCIPAL SKILLS/EXPERTISE DO YOU/CAN YOU BRING TO A NONPROFIT BOARD

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Administration/ Management | <input type="checkbox"/> Kids & Teens       | <input type="checkbox"/> Writing/Communication      |
| <input type="checkbox"/> Grant Writing/Research     | <input type="checkbox"/> Technology         | <input type="checkbox"/> Events Facilitation        |
| <input type="checkbox"/> Public Speaking            | <input type="checkbox"/> Cancer Survivor    | <input type="checkbox"/> Marketing/Public Relations |
| <input type="checkbox"/> Board Development          | <input type="checkbox"/> Foreign Languages  | <input type="checkbox"/> Finance/Accounting         |
| <input type="checkbox"/> Human Resources            | <input type="checkbox"/> Graphic Design     | <input type="checkbox"/> Networking/Contacts        |
| <input type="checkbox"/> Strategic Planning         | <input type="checkbox"/> Education/Training | <input type="checkbox"/> Fundraising                |
| <input type="checkbox"/> Clinical                   | <input type="checkbox"/> Legal              | <input type="checkbox"/> Political/Government       |

Do you have previous fundraising experience?  Yes  No

If yes, please describe your experience

---

---

Please list any languages you speak other than English: \_\_\_\_\_

Please list any special skills you'd like to share with us: \_\_\_\_\_

---

## COMPLETION OF THE FOLLOWING QUESTIONS IS VOLUNTARY.

Mondays at Racine will use the following information for grant and fundraising initiatives for statistical purposes only.

How did you hear about Mondays at Racine? \_\_\_\_\_

Please Check One (completion is voluntary)

- |   |   |  |                                       |
|---|---|--|---------------------------------------|
| <input type="checkbox"/> African-American | <input type="checkbox"/> American Indian/Alaskan Native   | <input type="checkbox"/> Asian/Southeast Asian | <input type="checkbox"/> Caucasian    |
| <input type="checkbox"/> Hispanic/Latino  | <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Other                 | <input type="checkbox"/> Multi-Racial |

**By signing below, I consent for each of my references to be contacted as a personal or professional reference for me to be provided in confidence to Gilda's Club. I confirm that I have completed the member profile truthfully. I understand that I may be required to attend an orientation meeting and/or training session. If I choose to volunteer, a background check may be conducted.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_