**BOARD MEMBER APPLICATION**

Dear Applicant,

On behalf of everyone here at Health Access Network, thank you so much for your interest in board service. We know that those with an interest in being a leadership volunteer have many choices. In our community, there are an array of remarkable organizations engaged in the important work of making our world a better place. We are humbled knowing that you are interested in us.

The following application offers us an opportunity to know more about you, your skills, attributes and what you would bring to our board. It also gives you a sense of what matters to us in a board candidate.

The goal of our process is to determine if we are a good fit for each other. Your level of commitment and ability to deliver on our expectations can help us to increase the scope and impact of our work. In addition, we want to know what motivates you so that we can help to create an excellent board experience for you.

Thank you again for your interest in our work and for taking the time to complete this application with thought and care. We look forward to reviewing it with that same level of thought and care and to continuing our conversations.

Sincerely,

Nicole M. Glidden RN, MBA, BSN

Chief Executive/Operations Officer

Health Access Network

**PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| Phone number |  |
| Email address |  |
| Employer |  |

**DEMOGRAPHIC INFORMATION**

As a Federal Qualified Community Health Center we are regulated by a federal agency, the Health Resource Service Authority (HRSA). HRSA’s guidelines regarding representation of members on our Governing Board of Directors is to assure representation of the populations of people residing within the service area. Please provide all demographic information that represents yourself:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Have you received any services from Health Access Network in the last 24 months? |  |  |

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Are you an employee at Health Access Network or directly related to an employee (spouse, child, parent, brother, sister by blood or marriage) |  |  |

| **Please check all that apply** |
| --- |
| **Gender** |
|  | Male |  | Female-to-Male |
|  | Female |  | Male-to-Female |
|  | Choose not to disclose |  | Genderqueer |
| **Ethnicity** |
|  | Hispanic, Latino/a, or Spanish origin |  | Cuban |
|  | Non-Hispanic, Latino/a, or Spanish origin |  | Mexican, Mexican American, Chicano |
|  | Choose not to disclose |  | Puerto Rican |
| **Race** |
|  | Native Hawaiian |  | Chinese |
|  | Other Pacific Islander |  | Filipino |
|  | Asian |  | Other Asian |
|  | Black/African American |  | Guamanian or Chamorro |
|  | American Indian/Alaskan Native |  | Japanese |
|  | White/Caucasian |  | Korean |
|  | More Than One Race |  | Vietnamese |
|  | Choose not to disclose |  | Samoan |

**VOLUNTEER EXPERIENCE**

Past and Present Membership:

Boards, committees, task forces in the public sector (business, civic, community, religious, political, professional, recreational or social)

|  |  |  |
| --- | --- | --- |
| Organization | Role/Title | Date of Service |
|  |  |  |
|  |  |  |
|  |  |  |

**WHY HEALTH ACCESS NETWORK?**

We are most appreciative of your interest in serving as a volunteer at Health Access Network and would like to hear more. Please share your motivation and what it is about our work that has led you to raise your hand to be a leading ambassador for us.

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Do you see any challenges and/or opportunities for us in the next few years?

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**SKILLS / EXPERTISE**

Please mark the skills and expertise you will bring to us that will strengthen the

board and enhance the ability of our organization to deliver on its mission.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Public Relations |  | Budgets and Balance Sheets |  | Public Policy/Advocacy |
|  | Legal Expertise |  | Human Resources |  | Accounting |
|  | Event Planning |  | Business Administration |  | Strategic Planning |
|  | Social media |  | Marketing |  | Public Services |
|  | Fundraising |  | Grant Writing/Management |  | Information Technology |
|  | Professional Nonprofit Experience |  | Public Safety |  | Business Management |
|  | Financial Management |  | Health Care |  | Education |
|  | Other (please explain): |  |

**ATTRIBUTES**

A board is more than a collection of individuals. It is an entity that governs, approves strategy and engages in robust discussion and debate on relevant issues. It must act as a single entity. As such, the personality traits you bring to the board will help us to ensure that we have a diversity of personality styles and traits that, when added to our current board members, will enhance the ability of the board members to work together as a governing body. Please indicate all the areas you feel represent your personality style.

|  |  |
| --- | --- |
|  | Collaborative |
|  | Respectful of varying points of view |
|  | Willing and able to lead a discussion |
|  | Facilitative style |
|  | Enthusiastic |
|  | Comfortable speaking in front of groups |
|  | Manages time well |
|  | Optimistic |
|  | Responsive |
|  | Strong work ethic |
|  | Good sense of humor |
|  | Asks tough questions respectfully |

**TIME**

Board service is a true commitment of time and energy. We estimate that board service could be a commitment of one to two hours each month.

Do you have any concerns or potential conflicts that may serve as impediments to this time commitment? If so, how will you manage the demands on your time?

|  |
| --- |
|  |