



**MANHATTAN CATHOLIC CHARITIES
SERVING RILEY & GEARY COUNTIES, & FT. RILEY
COMMUNITY ADVISORY BOARD APPLICATION**

Name: _____ Date: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____

Employer: _____

Occupation: _____

Work Address: _____

City, State, Zip: _____

Email: _____ Cell: _____

Birthday: _____ Recruited/Referred By: _____

Driver's License # _____ State _____ SS# _____

Birth Place: City _____ State: _____

1. List your educational background.

2. Provide a brief description of your employment history (Or attach a resume).

3. Why do you want to be a board member for Catholic Charities?

4. How can Catholic Charities benefit from your involvement as a board member?

-OVER-

So we may better match your knowledge and skills to the needs of the organization and the board, please check all of the areas that apply to you:

RESOURCE DEVELOPMENT:

- Access to Community Leaders
- Access to Neighborhood Leaders
- Access to People with Expertise
- Access to People with Money
- Willing to Contribute Services
- Willing to make Financial Contributions
- Willing to Make Material Contributions
- Willing to Raise Money

KNOWLEDGE/EXPERTISE:

- Board & Org. Development
- Computer/Informational Services
- Financial Management
- Fundraising
- Grant Writing
- Legal
- Personnel Administration
- Planning
- PR & Marketing
- Programs/Events
- Property Management

GEOGRAPHICAL AREA:

ETHNICITY:

- African American
- Asian
- Caucasian
- Hispanic
- Native American
- Other-_____

AGE:

- Over 65
- 51-65
- 36-50
- 21-35

SECTOR:

- Churches
- City/County Government
- Corporate
- Cultural/Arts
- Educational/Research
- Law Enforcement
- Local Media
- Political
- Small Business

Have you applied to be on a CC Board before? If so list which Diocese, address & date:

Please list names & numbers of anyone you know well, who is associated with CC:

Have you or are you working with other local non-profit organizations? If so list organization, contact name and phone number:

1. _____
2. _____
3. _____

I understand that a Kansas Bureau of Investigation and/or Police Department and/or other criminal background checks, such as a child abuse registry check, a motor vehicle check, court diversion check, and sex offender check may be made of my background, and that all information about me will be kept confidential by Catholic Charities.

My consent to which is hereby given, which consent shall be a continuing consent to periodic record checks for as long as I serve on a CC Community Advisory Board.

Signature: _____
Name

Date