

## 1110 Fairfield Avenue, Suite 100 P.O. Box 25940 Eugene, OR 97402 541-683-7291

Web Address: <a href="www.eugenecreativecare.org">www.eugenecreativecare.org</a>
Email: <a href="mailto:creativecare.eugene@gmail.com">creativecare.eugene@gmail.com</a>

## BOARD MEMBER APPLICATION

GENERAL INF	ORMATION					
ECC Site Your Child Attends:		Date: _		_		
Name:				_		
Last		First M.I.				
E-Mail:		Phone Number:	_( )	_		
Physical Address:				_		
	Street Address		Apt. #			
	City	State	Zip Code	<del>-</del> :		
Mailing Address:						
	Street Address		Apt. #			
	City	State	Zip Code	<del>-</del>		
Have you submitte	ed an application here before:	YES	NO			
Have you ever worked for Eugene Creative Care?		YEs	NO			
Can you commit to attending no less than one, two-hour board meeting every month? YES NO						
Can you commit to	o no less than a two year term?		YES 1	10		

EXPERIENCE	4000							
EMPLOYER #1		Job Title: _						
Company:		Supervisor:						
Phone Number: _()		Dates of Employme	ent: FROM _	то				
Address:Brief Description of Job Duti	City		State	Zip				
May we contact this company for a reference? YES NO								
EMPLOYER #2		Job Title: _						
Company:		Supervisor:						
Phone Number: _()		Dates of Employme	ent: FROM _	то				
Address:			C+o+o	7:n				
Brief Description of Job Duti	City ies:	·	5tate 	Zip				
May we contact this company for a reference? YES NO								
REFERENCES			1					
REFERENCE #1								
Name:	Relationship:		Phone #: _	_()				
REFERENCE #2	eri Na							
Name:	Relationship:		Phone #: _	_()				
REFERENCE #3								
Name:	Relationship: _		Phone #:	_()				

EDUCATION								
HIGH SCHOOL OF GENERAL EDUCATION DIPLOMA								
Name of School: Location: (City & State):								
(Dates of Attendance) FROM TO Did You Graduate? YES NO								
COLLEGE								
Name of School: Major:								
Location: (City & State): (Dates of Attendance) FROM TO								
Did You Graduate? YES NO If so, What degree do you Hold?								
SPECIAL SKILLS AND QUALIFICATIONS								
Eugene Creative Care is a nonprofit organization committed to providing early childhood and school age child development programs and services to the Bethel and 4J school communities. ECC seeks to include members on our Board of Directors who have a desire to make a positive difference in the quality of services and employment experiences ECC offers our clients and staff.								
Please summarize any special skills, strengths, and/or qualifications that you feel you have that would make a positive contribution as a board member with Eugene Creative Care?								

## DISCLAIMER AND SIGNATURE

I certify that the information on this application and is accurate and complete to the best of my knowledge. I understand and agree that failure to fully complete this form, any misrepresentation, or omission of facts represents grounds for elimination from consideration for Board Member.

I authorize Eugene Creative Care to investigate all statements of fact contained in this application and to contact any and all parties as necessary in arriving at an chair appointment decision. I hereby release and hold harmless Eugene Creative Care, its representatives, and anyone contacted during this verification process from liability for any possible resulting damages.

I understand that this application is not - and is not intended to be - a contract of service. I also understand that I will financially be responsible if an FBI Criminal Background Check with Fingerprint Clearance is necessary to establish clearance (which typically occurs when applicants reside out of the state within the last 18 months of application date).

I understand, if employed, I will be required to furnish proof of eligibility to work in the United States and to comply with company and departmental regulations, to include providing documentation of my qualifications and credentials for the position I am hired for, if requested.

Applicant Signature:			Date:			
FOR OFFICIAL USE ONLY						
Interviewed By Executive Director	YES	NO	Date:			
Interviewed by Board of Directors	YES	NO	Date:			
Appointed As A Board Member?	YES	NO	Date:			
			Position Appointed:			
Executive Directors Signature:						
Board Directors Signature:						
Date:						