

The Mental Health Association in Tompkins County

Board of Directors Membership Application

Applicant Name: _____

Address: _____
City, State, Zip _____

Email: _____
Phone: _____

Employer: _____
Title: _____

Address: _____
City, State, Zip _____
Phone: _____

Experience

Have you ever served on a board? Yes No
If yes, for whom and when? _____

Did you ever hold an officer position on a board? Yes No
If yes, what position?
(check all that apply) President Vice President Treasurer Secretary

Are you comfortable soliciting others for funding/gifts? Yes No
If yes, describe any experience(s) in doing so:

Describe why you are interested in becoming a board member of The Mental Health Association in Tompkins County

Describe any special skills, knowledge and/or experience relevant to the work of The Mental Health Association in Tompkins County Board of Directors

Which of your skills would you like to utilize on the Board? *check those that apply*

- | | | |
|---|--|---|
| <input type="checkbox"/> Accounting or Finance | <input type="checkbox"/> Community Relations | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Event/Project Management | <input type="checkbox"/> Strategic Planning | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Volunteer Management | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Policy Development |
| <input type="checkbox"/> Other(s) _____ | | |

Membership on the board requires your participation on at least one committee.

Which committee would you be interested in serving on? *check one or more*

___ Finance/Audit ___ Fundraising/Development

Membership on the board requires your availability for a meeting on the last Monday of every month at 12 pm. Will you be able to attend? ___ Yes ___ No

Duties and Responsibilities of a MHATC Board of Directors Member

- Serve a minimum of one (1) three-year term on the Board. Eligible to serve an additional three-year term if re-elected.
- Attend and actively participate in all regular Board meetings, committee meetings, and special planning sessions
- Prepare for meetings, reviewing and commenting on minutes and reports
- Read By-Laws, Board Policies and Procedures and other documentation as may be required
- Know the agency's mission and vision, and understand how current programs relate to that mission and vision
- Participate fully in one or more committees
- Participate in planning and be present during fundraising events
- Actively participate in the board's annual evaluation
- Faithfully read and understand the organization's financial statements
- Participate in the evaluation of the performance of the Executive Director
- Sign all required documents and policies, such as the Confidentiality Agreement and the Conflict-of-Interest Policy
- Serve as active advocates and ambassadors for the organization
- Leverage connections, networks, and resources that may be of benefit to the organization's mission

I have read, understood, and agree to comply with all the duties and responsibilities of a MHATC Board of Directors member.

If you join the Board, you agree that you can provide at least 2 hours a month in attendance to Board and Committee meetings, and that you do not have any conflict-of-interest in participating on the Board.

Signature

Date

Please attach your resume