

Board of Director Application

Open Arms Free Clinic, Inc. identifies individuals in the community who would be good members to serve on the volunteer Board of Directors. Applications are requested to be completed before October 31 and presented for a vote at the November Board Meeting. All accepted candidates would start their board tenure in January, unless other circumstances require alternative action. Thank you in advance for completing this application.

Full Name *

Date of Birth *

Mailing address *

(Home) Street, City, State, Zip Code

Primary Phone *

Email address *

If you have a gmail account, that is preferred if possible.

Current/Most Recent Employer and Position *

Employer Address, if applicable

Please list boards and committees that you currently or have served on, including the duration of service time (e.g. 1yr, 2yr, etc) *

Indicate if they were related to business, civic, political, professional, religious, social, etc.

- Clinical Operations
- Fundraising / Special Events
- Government Affairs
- Human Resources / Personnel
- Legal Services
- Marketing / Communications
- Outreach / Advocacy
- Social / Human Services
- Other:

If checked other, please describe:

Are you able to make a 3 year commitment?*

- Yes
- No

Are you able to attend 5 board meetings a year?*

- Yes
- No

Are you able to actively participate in at least one committee or volunteer in the clinic?*

- Yes
- No

Volunteer opportunities are presented within the clinic for medical and non-medical roles, as well as outside the clinic for special events and outreach.

Why are you interested in serving on the board? *

Board of Director Application will be submitted to Open Arms Free Clinic, Inc.

Submit

You have 12 required fields to fill out. [Click here to show them.](#)