SPRING VALLEY AREA
COMMUNITY FOUNDATION
an affiliate fund of Southern Minnesota Initiative Foundation

Board Application

Name_____

Phone (mobile)_____ Phone (daytime)_____

Home Address _____City_____

Business Address _____ City_____

E-mail_____ Fax_____

Place of Employment (if applicable) _____

Position or Title_____

1. Tell us about yourself: background; work experience and responsibilities; education (formal and informal); interests, etc. (Please attach a resume or vita if available.)

2. List the organizations and agencies with which you are affiliated. (Include volunteer activities, boards served on, offices held, if appropriate, etc.)

3. What do you see as the most significant opportunities, issues, and challenges facing our community?

4. Describe the two or three most important characteristics of a Board Member.

5. What are some of the things that motivate you to seek a position on Spring Valley Area Community Foundation's Board? What gets you excited and interested?

6. Please describe any past involvement with the Spring Valley Area Community Foundation.

7. Given Spring Valley Area Community Foundation's mission, what strengths, knowledge and expertise will you bring to this Board?

Please attach any other information about yourself and your visions for our community.

Signature_____ Date_____