

**CHILDREN'S ADVOCACY CENTER OF COMAL COUNTY, INC.  
BOARD MEMBER APPLICATION**

**BACKGROUND INFORMATION**

**Name:**

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**Address:**

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**Home Phone:**

**Work:**

**Cell:**

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**E-mail:**

**Fax:**

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**Areas of expertise you bring to the board:** *(please check all that apply)*

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Accounting

Special Events

Fundraising

Evaluation

Information Technology

Law

Marketing/Public Relations

Human Resources

Strategic Planning

Other (please specify:)

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**Please give details as to your area of expertise.**

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**What is your interest and motivation for serving on the Board of Directors?**

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**Please list any activities, clubs, or organizations you have been involved with:**

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**Please briefly highlight the skills, qualifications, experience, and resources you will bring/share with the organization.**

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**Which board committees are of interest to you? (check all that apply)**

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Volunteer	Finance
Fundraising	Human Resources
Marketing	Strategic Planning

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**EMPLOYMENT HISTORY:**

List your last three places of employment (the first being your present employer)

NAME OF COMPANY	TITLE	JOB DESCRIPTION

**PERSONAL**

List any community groups in which you are presently active (professional associations, faith communities, service organizations, etc):

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**FEEL FREE TO ATTACH YOUR RESUME.**

**AFFIRMATION**

By my signature, I ask to be considered for appointment or election to the Board of Directors of Children's Advocacy Center of Comal County, Inc.

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Applicant Signature and Date: