

FRISCO ASSOCIATION FOR THE ARTS Board of Director's Application

APPLICANT INFORMATION					
Name:					
Date of birth:	E-Mail:				
Current address:	How Long:				
City:	State:	ZIP Code:			
Home Phone:	Cell Phone:				
Spouse name:	Children & ages:				
EMPLOYMENT INFORMATION					
Current employer:					
Employer address:		How long?			
Phone:	Fax:	E-Mail:			
City:	State:	ZIP Code:			
Position:					
BOARD/VOLUNTEER EXPERIENCE – 1					
Organization/Address:					
Role:		Phone:			
Length of time involved:		Contact:			
Other Info:					
BOARD/VOLUNTEER EXPERIENCE – 2					
Organization/Address:					
Role:		Phone:			
Length of time involved:		Contact:			
Other Info:					
BOARD/VOLUM	NTEER EXPERIENCE – 3				
Organization/Address:					
Role:					
Length of time involved:		Phone:			
Other Info:		Contact:			
OTHER INVOLVEMENT (volunteer, professional associations, awards, etc)					
LIST RECENT ART EVENTS YOU HAVE ATTENDED					

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PREVIOUS EXPERIENCE IN ARTS/CULTURE				
WHY ARE YOU INTERESTED IN FRISCO ASSOCIATION FOR 1	THE ARTS?			
WHAT DO ENVISION FOR THE FUTURE OF THE ARTS IN F	RISCO?			
HOW CAN YOU PERSONALLY CONTRIBUTE TO THE ARTS IN FRISCO?				
AREAS OF INTEREST				
Fund DevelopmentSpecial EventsCorporate SponsorshipsFiMarketing & CommunicationsMembership & VolunteersPublic Speaki				
Other skills and areas of interest:				
REFERENCE: (other than family members)				
Name: Relationship:				
Day Phone:				
Email:				
SIGNATURES	Date:			
Signature of applicant:				

For Staff Use Only				
Date Approved:	Term Start Date:	Term End Date:		
Signature of Board Officer		Date:		