

Board of Directors Application

Name:	Title:	
Bus. Name:		
Email:		
Previous/current experience serving		
Please identify the board member	r position you are applying for:	
President	Parliamentarian	
Treasurer	Member-At-Large	
Committee or Activity Involveme	nt (in addition to the board position or as an alternative):	
Community Affairs	Publicity Membership	
Programming	Food Drive Holiday Adoption of a Facility	
My signature below confirms I have	read and agree to the Board of Director's Responsibilities.	
Signature:	Date:	_

Please return the following completed documents to Melissa Rapkin, mrapkin@monarchcare.org:

- This Application and
- your <u>resume</u> or a <u>summary</u> of pertinent job and board member experience.

If you have any questions, please contact Melissa Rapkin, 954-655-8645 mrapkin@monarchcare.org