



PO Box 12469~ Philadelphia, PA 19151~ www.mlkidney.org

Board of Directors Candidate Application

Date _____

Name _____
First MI Last

Residence

Address _____

Phone _____ E-mail _____

Employer

Name _____

Your title _____

Address _____

Phone _____ E-mail _____

Type of business or organization _____

Primary service(s) and area/population served _____

Preferred method of contact () Work () Cell Phone

Please list boards and committees that you serve on, or have served on (business, civic, community, fraternal, political, professional, recreational, religious, and social).

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Education/Training/Certificates

Optional – Have you received any awards or honors that you'd like to mention?

How do you feel **Marion Luckers Kidney Foundation** would benefit from your involvement on the Board?

Skills, experience and interests (Please circle all that apply)

Finance, accounting

Personnel, human resources

Administration, management

Nonprofit experience

Community service

Policy development

Program evaluation

Public relations, communications

Education, instruction

Special events

Grant writing

Fundraising

Outreach, advocacy

Other _____

Other _____

Other _____

Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of **Marion Luckers Kidney Foundation**.

Please provide 3 professional references:

	Name	Phone Number	Email
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

Send completed application to info@mlkidney.org. All applicants must also include a copy of a resume. Finalists will be contacted by the Board for an interview.

Thank you very much for applying