

**CASA/GAL Board Volunteer Association
Board of Trustees Application**

Name

Business Information:

Business Name

Professional Title

Business Address

Business Phone

Business Fax

Email Address

Cell Phone

Personal Information:

Home Address

Home phone

Home Fax

Preferred contact for daytime phone calls and for CASA/GAL Board mail is: Business Home

May we contact you at home, if needed, in the evening or on the weekend? Yes No

Please attach a resume and/or biographical information. Please also answer these questions below.

- 1) What other volunteer, charitable or civic work have you been involved in?

- 2) What talents or skills do you bring to the CASA/GAL Board?

- 3) Describe the reason you are interested in serving on the CASA/GAL Board:

Board Member nominating you for a seat on the CASA/GAL Board:

I have received a copy of the CASA/GAL Board Member Responsibilities and I agree, if elected to the CASA/GAL Board, I will follow this policy to serve the CASA/GAL organization, purpose and mission.

Please return this form and your resume or biography to CASA/GAL, 650 Dan Street, Akron, OH 44310. You may fax materials to Beth Cardina at (330)643-8682. Thank you for your interest in CASA/GAL.

Signature _____ **Date** _____