### Board Director Membership Application

We appreciate your interest in becoming a board member for Peer and Family Career Academy (PFCA).

**Name** First MI Last Credentials

Email AddressHome Mobile

**Residence** Street Address City State Zip Code

**County:**

**Employer** Click here to enter text.Your Title

Street Address City State Zip Code

**Please list boards and committees that you serve on, or have served on in the past 5 years** (business, civic, community, fraternal, political, professional, recreational, religious, social).

Organization Role/Title Dates of Service

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**We are striving for a board comprised of individuals with different experiences and cultures. Please respond to these optional demographic questions:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Age Range:**  18 – 25 years old  26 – 35 years old  35 – 45 years old  46 – 55 years old  56 – 65 years old  65+ | **Race/Ethnicity:**  Caucasian  Hispanic/Latin  Black/African American  Asian  Native American/Indigenous  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Communities:**  Peer Support  Family Support  Previous/ Current Military Service  LGBTQ+ | **Languages:**  English  Spanish  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Preferred Pronoun:**  She/Her  He/Him  They/Them  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# **Education/Training/Certificates/Awards**

Click here to enter text.

**How would the Peer and Family Career Academy (PFCA) would benefit from your involvement on the Board?**

Click here to enter text.

**Why does the PFCA Mission resonate with you?**

Click here to enter text.

**What are your personal goals for the PFCA?**

Click here to enter text.

**Skills, Experience and Interests** (Please check all that apply)

Finance, accounting

Personnel, human resources

Administration, management

Nonprofit experience

Community service

Policy development

Program evaluation

Public relations, communications

Public relations, communications

Special events

Grant writing

Fundraising

Other: Click here to enter text.

Other: Click here to enter text.

Other: Click here to enter text.

**Please tell us anything else you would like to share.**

Click here to enter text.

1. Please attach a description of your professional background and qualifications.

Include a resume.

1. Please share your relevant personal experiences and tie to PFCA’s mission, and

why you are interested in serving on the Peer and Family Career Academy Board of

Directors.

1. Please identify any affiliations/positions you hold which could present a conflict

of interest for you in participating on the PFCA Board of Directors.

1. Please affirm with your signature below that you are willing to accept the

responsibilities as detailed in the attached Board of Directors Bylaws.

**If selected to be a member of the PFCA Board of Directors, I am willing to**

**accept the responsibilities as described**.

**Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please send application to** [**hello@azpfca.org**](mailto:hello@azpfca.org) **and our Membership committee chair Kathy Bashor at** [**kathywilderness12@gmail.com**](mailto:kathywilderness12@gmail.com)

**Board Director Commitment Form**

## Board Director Code of Conduct

As a board member I understand that I have duties of care, loyalty, and obedience to the organization.

* The duty of care is the duty to pay attention to the organization—to monitor its activities, see that its mission is being accomplished, and guard its financial resources.
* The duty of loyalty is the duty to avoid conflicts of interest, and
* The duty of obedience is to carry out the purposes of the organization and to comply with the law.

## Key Responsibilities

As a Director, I agree to the following responsibilities:

* Be informed.
* Understand the roles, responsibilities, and liabilities of serving on the Board.
* Advance the mission of the Peer and Family Career Academy
  + Maintain knowledge of the organization’s mission, services, policies, and programs.
  + Keep up-to-date on developments in the mental health and/or substance abuse field.
* Select and hire the Executive Director (ED) through a Board approved process.
  + Provide ongoing support and guidance for the ED.
  + Understand the role of the ED versus the role of a Board Director (see the Board Training Manual).
  + Provide support and advice to the staff and avoid interfering in management activities.
  + Annually review ED performance.
* Ensure effective organizational planning.
  + Determine and monitor the organization’s programs and services.
  + Participate in the development of a strategic plan to accomplish the mission, oversee its implementation and evaluate its success.
* Actively participate in all board and organizational activities.
  + Contribute at least 6 hours per month by attending board meetings, committee meeting, fundraising events, or fulfilling committee assignments.
  + Attend 75% of monthly board meetings, either by phone or in person.
  + Review agenda and supporting materials prior to board and committee meetings.
  + Serve on at least one committee and periodically take on special assignments.
  + Suggest nominees to the board who can make significant contributions to the organization.
  + Assess the board’s performance.
  + Participate and contribute to organizational marketing and fundraising activities.
* Ensure adequate resources.
  + Make a personal financial contribution to the organization, or find a financial contribution.
  + Participate in fundraising efforts of the PFCA.
  + Support the organization by representing the organization in the community and with funders.
* Carry out the fiduciary responsibilities of the board, such as reviewing the organization’s annual financial statements, selecting an auditor and receiving the auditor’s report.
* Follow conflict-of-interest and confidentiality policies.

## Committee Commitment

Please check the following committee(s) in which you will serve:

\_\_ Curriculum Review Committee

\_\_ Fundraising and Donor Development Committee

\_\_ Membership Committee

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_        \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature                                                                             Date**