

**2024 Board Membership Application**

*All the information that you provide in this questionnaire is strictly confidential.*

# Personal Information

|  |  |
| --- | --- |
| **Name:** (First/MI/Last) |  |
| **Address:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |
| **Current Occupation:** |  |

# Children at MCH

*List all children currently attending MCH:*

|  |  |  |
| --- | --- | --- |
| **Child's Name** | **Child's Class:** | **Years at MCH** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# Personal Statement

Please describe why you want to be a member of the board of directors.

|  |
| --- |
|  |

# Previous Board Experience

Please describe any previous board experience.

|  |
| --- |
|  |

# Skills and Experience Profile

Please outline any experience you have in the following areas that you feel would benefit the MCH PA.

|  |  |
| --- | --- |
| **Fundraising** |  |
| **Marketing**  |  |
| **Communications** |  |
| **Graphic Design/Creative** |  |
| **Website Design & Management** |  |
| **Project Management** |  |
| **Accounting/Budgeting** |  |
| **Business Management** |  |
| **People Management** |  |
| **Leadership** |  |
| **Other** |  |

# Affirmation of Responsibility

By submitting this application, I am affirming that I understand the following. Please place an "X" in each box.

|  |  |  |
| --- | --- | --- |
|  |  | If elected, I will be able to serve a 2-year term in its entirety. |
|  |  |  |
|  |  | I can commit to attendance at a monthly 2-hour board meeting. |
|  |  |  |
|  |  | I can commit to 2-3 hours of volunteer time per month outside the board meetings. |
|  |  |  |
|  |  | I understand and am committed to the vision and mission of the MCH Parent Association. |

# Submission

Please email your completed form to pa@mch-pa.org no later than Friday, May 3, 2024.