

**Medford Senior Center
Application for Board Appointment**

Name: _____ Day Phone: _____

Email: _____ Cell Phone: _____

Address: _____

Occupation: _____

Please check skills you could contribute to the board:

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> accounting | <input type="checkbox"/> management | <input type="checkbox"/> public relations |
| <input type="checkbox"/> investment | <input type="checkbox"/> marketing | <input type="checkbox"/> knowledge of senior services |
| <input type="checkbox"/> fundraising | <input type="checkbox"/> programming | <input type="checkbox"/> public speaking |
| <input type="checkbox"/> community relations | <input type="checkbox"/> planning | <input type="checkbox"/> lobbying |
| <input type="checkbox"/> other (please specify) : _____ | | |

What is your area of interest in helping the Center?

On what other boards have you served?

What charitable or community activities have you been part of?

General meetings are held the 4th Monday of each month at 10:00am. Can you attend on a regular basis?

Yes No

Are you able to contribute time to volunteer at the Center? Yes No

Describe:

Signature: _____ Date: _____