



edible flint Leadership Board Candidate Application

Name, phone, email address of organizational representative:

Deborah Hamilton, info@edibleflint.org, (810) 244-8547

Please return this application to the above address by (date): **_March 17, 2017_**

This application will help the Membership Committee consider the listed individual for inclusion on the slate of members for the Leadership Board for *edible flint*. This application will be reviewed and the nominee will be contacted about this application. The slate of Leadership Board Candidates will be affirmed at the annual meeting. This application does not guarantee membership on the Leadership Board of *edible flint*.

Date _____

Nominee: _____
 First MI Last Familiar name

Residence

Address _____

Phone _____ E-mail _____

Employer (if applicable)

Retired ☐

Name _____

Your title _____

Address _____

Phone _____ E-mail _____

Type of business or organization _____

Primary service(s) and area/population served _____

Preferred method of contact: () Work Phone () Home Phone () Cell Phone () E-mail

Nominated By:

 First MI Last Familiar name

Residence

Address _____

Phone _____ E-mail _____

Has Nominee Been Informed of Nomination: (please circle) **YES** **NO**

Please list boards and committees that the nominee serves on, or has served on (business, civic, community, fraternal, political, professional, recreational, religious, social). (Please use the back for additional space.)

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

In what ways has the nominee supported or been engaged with *edible flint*?

<input type="checkbox"/> Attended monthly meeting	<input type="checkbox"/> Attend work group meeting	<input type="checkbox"/> Part of Food Garden Tour planning
<input type="checkbox"/> Went on Food Garden Tour	<input type="checkbox"/> Purchased Garden Starters Kit	<input type="checkbox"/> Enrolled in Training Class
<input type="checkbox"/> Purchased services for garden (e.g. tilling, soil sample, compost delivery)	<input type="checkbox"/> Volunteer at events for <i>edible flint</i>	<input type="checkbox"/> Worked at <i>edible flint</i> Garden
<input type="checkbox"/> Donated to support <i>edible flint</i>	<input type="checkbox"/> Other, specify:	

Experience/Education/Training/Certificates (please include any experience that may have relevance.)

How do you feel *edible flint* would benefit from the nominee's involvement on the Board?

QUESTIONS BELOW ARE FOR SELF-NOMINATED APPLICANTS ONLY:**Skills, experience and interests** (Please circle all that apply)

Finance, accounting
 Personnel, human resources
 Administration, management
 Nonprofit experience
 Community service
 Policy development
 Public relations, communications
 Legal

Strategic Planning
 Special events
 Grant writing
 Fundraising
 Outreach, advocacy
 Other _____
 Other _____
 Other _____

Please list any groups, organizations or businesses that are part of your network that might benefit *edible flint* through your connection.

Will you be able to attend bi-monthly meetings and give time to support the organization at additional meetings? ☐ Yes ☐ No

Thank you very much for applying. The nominee will be contacted about this application.