

PO Box 312, Esko, MN 55733 218/879-7608 Fax: 218/879-7609

North Country RIDE Board of Directors Application

Please return this application to the above address

Date			
Name			
First	MI	Last	
Residence			
Address			
Phone		E-mail _	-
Employer			
Name			
Your title			
Address			
Type of business or o	rganization		
			
Preferred method of	contact () V	Vork () Reside	ence
		-	on, or have served on (businessional, religious, social).
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Organization		Role/Title	Dates of Service

Education/Training/Certificates				
Optional – Have you received any award	ds or honors that you'd like to mention?			
How do you feel North Country RIDE wo	ould benefit from your involvement on the Board?			
Skills, experience and interests (Plea	se circle all that apply)			
Finance, accounting	Education, instruction			
Personnel, human resources	Special events			
Administration, management	Grant writing			
Nonprofit experience	Fundraising			
Community service	Outreach, advocacy			
Policy development	Other			
Program evaluation	Other			
Public relations, communications	Other			
Please list any groups, organizations or bu of North Country RIDE.	isinesses that you could serve as a liaison to on be			
Please tell us anything else you'd like to sh	nare.			