

## **Board of Directors Application**

Deadline:

	Three year term commences on of, 20_	
Name	Title	
Company	Industry Description	
Address	Phone/Email	
	ber Committee/Project/Event Assignments	
	t?	
What was your least enjoyed assignment?		_
Community Board or committee service ex	perience	
	like to develop?	
What areas of expertise do you have to sh	are with our board?	
	s on over the next 12 months?	
·	chamber throughout the year (Example: Golf Outing.) Will you be able to plain.	
	the 3 <sup>rd</sup> Tuesday at 8:30am (excluding July and Dec.). What, if any, conflicts o	ok
	pointed to a committee assignment that may meet approximately 12 times   it, Finance). What is your preference?	
solid ethics, strong community involvement and beli	who will participate and support all chamber events. These individuals have a track record o eve in the mission of our organization. The individual is committed to participate in board . The right person will have demonstrated community service, enthusiasm, energy and know	
•	rd member and certify that the information provided in this application is	
accurate and reflective of my views. Sign	ature	
**Submit by	to info@ashtabulachamber.com or fax: 440.992.8216	

Mission: Advocating for business by engaging our members and connecting our communities to improve the economic vitality of Ashtabula County.