

Mental Health Advocacy Nonprofit Board Member Application Form

Personal Information

Full Name

Email Address

Phone Number

City

State/Province

Professional & Volunteer Experience

Current Profession/Occupation

Relevant Experience (briefly describe)

Previous Volunteer/Board Experience

Interest in Organization

Why are you interested in serving as a board member?

How do you believe you can contribute to our mission?

Please list any specific skills, expertise, or networks you can bring

Additional Information

Potential Conflicts of Interest (if any)

How did you hear about us?