



HAVERFORD TOWNSHIP ADULT SCHOOL

Return To: Haverford Township Adult School

Attn.: Board Application

P.O. Box 806, Havertown, PA 19083

610-446-8022

support@haverfordadultschool.org

HAVERFORD TOWNSHIP ADULT SCHOOL BOARD OF DIRECTORS APPLICATION

Name: _____

First

Last

Home Address: _____

Phone: _____

Home

Office

Email: _____

Retired (Yes/No) _____

If no, please specify current position/ If yes, please specify last position:

| Company | Position | From | To | Details |
|---------|----------|------|----|---------|
| | | | | |

Education (Please list all undergraduate and graduate degrees earned)

Haverford Township Resident? (Yes/No) _____ If yes, how many years? _____

Haverford Township Business Owner (Yes/No) _____

Have you taken a HTAS course? _____ If yes, how many? _____

Have you taught at the HTAS Course (Yes/No) _____ If yes, please provide details:

Why are you interested in our organization? _____

What particular talents or skills would you bring to the HTAS Board?

| Please indicate your experience in the following areas: | Very Experienced | Some Experience | Little or No Experience |
|---|------------------|-----------------|-------------------------|
| Board Development (Recruitment, Training, Evaluation) | | | |
| Financial Management and Control (Budgeting, Costing, Accounting) | | | |
| Communication, Public and Media Relations, Social Media | | | |
| Information Technology/ Website Development | | | |
| Creative Writing, Journalist | | | |
| Advertising | | | |
| Marketing | | | |
| Event Planning and Implementation | | | |
| Brochure Development | | | |
| <i>List other skills</i> | | | |
| | | | |

For the items you checked as “very experienced” or “some experience”, please provide more details:

What are your interests?

What are your other volunteer commitments?

Meetings are held 6 to 9 times annually on Thursday evenings between 7:00 p.m. and 9:00 p.m. What limitations do you have for attending meetings?

I certify the answers I have made to each and all of the questions are true to the best of my knowledge and belief.

Date

Signature

Thank you for taking the time to complete this application form and for offering your time and talents. The Board of Directors will review your application at its next scheduled meeting. You will be contacted as soon as this has been completed. We will invite you to a Board meeting at which time you will have the opportunity to meet the members, observe our meeting procedures and ask any questions you may have about the HT Adult School.

Please feel free to include additional information that might be pertinent to service on the HTAS Board.