

VOLUNTEER ASSESSMENT FORM



Contact Info

Name: _____ Date: _____

Address: _____

Telephone: (____) ____-____ Email: _____

Preference(s)

Board of Directors

Self-Employment Committee

Loans

Experience

1. What community and/or organizational experience do you have that you believe would contribute to Community Futures' objectives?

2. What employment and/or entrepreneurial experience have you had that would support your work with Community Futures?

3. Please comment on why you would like to volunteer with Community Futures of Greater Trail.

4. What interests you the most about Community Futures of Greater Trail?

5. Please list other volunteer positions or other organizations with which you have been involved with in the past 10 years.

6. Please provide any other comments that may assist the Board of Directors in consideration of your candidacy.

References

Please provide names and contact information for 2 references who can support your previous community involvement activities and/or accomplishments.

1. Name: _____

Telephone: (____) ____ - ____ Email: _____

Organization: _____

2. Name: _____

Telephone: (____) ____ - ____ Email: _____

Organization: _____