



**Three Blossoms Ministry**  
**Board of Directors Application Form**

**Name:** \_\_\_\_\_

**Home address:** \_\_\_\_\_

\_\_\_\_\_

**Email:** \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

**Referred by:** \_\_\_\_\_

**Gender:** M \_\_\_\_\_ F \_\_\_\_\_

**Relevant Experience and or Employment (may attach additional sheet):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Why are you interested in joining the Three Blossoms Ministry board?**

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**Other volunteer commitments:**

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If you have served on a board before, please provide the name, dates of service, and reason for leaving for the three most recent board positions:

1. 

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2. 

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3. 

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**Please indicate your skills:**

- ☐ Accounting/ Bookkeeping
- ☐ Computer Software Skills: MS Office Suite or Other \_\_\_\_\_
- ☐ Computer Design Skills: Adobe Suite or Other \_\_\_\_\_
- ☐ Computer Finance Software: Quicken for Nonprofits or Other \_\_\_\_\_
- ☐ Database Skills
- ☐ PC or ☐ Mac
- ☐ IT
- ☐ Fundraising
- ☐ Graphics
- ☐ Grant Writing

- ☐ Interpretation/ Translation skills
- ☐ Knowledge of best practices for social services
- ☐ Legal
- ☐ Marketing/advertising
- ☐ Planning
- ☐ Program Evaluation
- ☐ Program Management
- ☐ PR
- ☐ Public Speaking
- ☐ Policy Development
- ☐ Social Media
- ☐ Other \_\_\_\_\_

Each year, every board member must disclose any potential conflicts of interest as a board member. Please describe any conflicts of interest you would need to disclose if you joined the board:

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**Board meetings are scheduled for the first Thursday of each month, from 5:30 to 7:00 PM. Are you available?    \_\_Yes        \_\_No**

The minimum expectations for board members are listed below. Please confirm your ability and willingness to meet each.

If selected for the board:

- \_\_\_\_\_ I will attend and actively participate in at least 10 of the 12 monthly board meetings.
- \_\_\_\_\_ I will make a personal annual financial gift of \$100 or more.

\_\_\_\_\_ I will raise at least \$5000 per year for the organization by direct solicitations, selling tickets to events, or other fundraising activities.

\_\_\_\_\_ I will manage at least one to three relationships on behalf of the organization.

Please check the times you are available for an interview with the Nominating Committee meeting:

\_\_\_\_\_ July 25 at 5:30 PM

\_\_\_\_\_ July 27 at 3:30 PM

\_\_\_\_\_ July 25 at 6:30 PM

\_\_\_\_\_ July 27 at 4:30 PM

\_\_\_\_\_ July 25 at 7:30 PM

\_\_\_\_\_ July 27 at 5:30 PM

\_\_\_\_\_ July 26 at 5:30 PM

\_\_\_\_\_ July 28 at 5:30 PM

\_\_\_\_\_ July 26 at 6:30 PM

\_\_\_\_\_ July 28 at 6:30 PM

\_\_\_\_\_ July 26 at 7:30 PM

\_\_\_\_\_ July 28 at 7:30 PM

Does Three Blossoms Ministry have your permission to conduct a background check if you are considered for a position on the board? ☐ Yes ☐ No

Have you been convicted of a crime? ☐ Yes ☐ No If yes, please explain:

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Please attach your resume to this application.

Three Blossoms Ministry appreciates your interest, and your information will be confidential.