

NONPROFIT BOARD TRAINING

Confidential Application

Please TYPE. Use additional sheets where necessary.



PERSONAL DATA

Name:

Last	First	Middle	Name called
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Home Address:

Street Number	Apt. Number
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City	County	Zip
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Phone	Cell Phone	Email
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Age:	Date of Birth:	Male	Female
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Race:	Length of residence in Triangle area:
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How did you hear about S.P.A.R.C. Nonprofit Board Training? (If referred by program graduate, please name)

EMPLOYMENT DATA

Employer:

	Number of years
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Work Address:

Street Number	Suite Number
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City	County	Zip
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Work Phone	Work Email
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Type of Business:	Title:
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Briefly describe your current position:

S.P.A.R.C. Strong Partnerships Activating Real Change

NONPROFIT BOARD TRAINING



I would prefer mailed correspondence at my: Home Office

EDUCATION

Degree / Major	School	Years
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Degree / Major	School	Years
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PROFESSIONAL AFFILIATIONS & HONORS

Name of Group	Position	Awards	Years of Service
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Name of Group	Position	Awards	Years of Service
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Name of Group	Position	Awards	Years of Service
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Name of Group	Position	Awards	Years of Service
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COMMUNITY ORGANIZATIONS & VOLUNTEER INVOLVEMENT

Organization	Position	Service Period
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Organization	Position	Service Period
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Organization	Position	Service Period
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Organization	Position	Service Period
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Can you commit to the 6 week training course?
(See schedule which specifies date and times) Yes No

United Way of the Greater Triangle
2400 Perimeter Park Drive
Raleigh, NC 27560
919.460.8687

Visit us online at unitedwaytriangle.org
To find or give help, dial 2-1-1

S.P.A.R.C. Strong Partnerships Activating Real Change

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HOW YOU “LIVE UNITED”

Describe your responsibility and leadership role in what you consider the most important or valuable volunteer (non-paid) experience. Have your efforts affected or changed the community?

LIVE UNITED



**United Way
of the Greater Triangle**
unitedwaytriangle.org

COMMITMENT

Describe your interest in becoming a S.P.A.R.C. Nonprofit Board Training Participant.

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When you think of “giving service”, to what types of issues would you like to commit your time?

I would like to be considered for participation in United Way S.P.A.R.C. Nonprofit Board Training. By submitting this application, I certify that all the information contained herein is true and correct to the best of my knowledge. If I am accepted,

- I commit to attending all sessions and activities during the program.
- I commit to a \$25 registration fee, due at the first session.
- I also understand that upon completion of the training, I am expected to utilize the knowledge gained and actively volunteer with an organization in my community.

X _____
Signature (or type your name if sending via e-mail) Date

SUBMISSION INSTRUCTIONS

Submit completed application by mail to:

Mailing address: United Way of the Greater Triangle
SPARC Nonprofit Board Training
2400 Perimeter Park Drive, Suite 150
Raleigh, NC 27560

Email: sparc@unitedwaytriangle.org

Fax: 919.460.9019

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