



Board of Directors Application Form

1. Candidate Name: _____
Home Address: _____

Home Phone: _____ Cell Phone: _____
Email Address: _____
2. Current Position & Employer: _____
3. Why are you interested in serving as a Board Member for Main Street Franklin?
4. What other volunteer commitments do you currently have?
5. Please share any other information you feel important for consideration of your application to serve as an Main Street Franklin Board Member.

6. The Main Street Franklin Board of Directors meets on the 3rd Friday of every month at 9:00 a.m. The meeting generally lasts about one (1) hour. Do you have any standing commitments that create a scheduling conflict for you?

Yes:

No:

For Board Use

<input type="checkbox"/>	Nominee has had a personal meeting with either an Officer, Director, or other MSF representative	Date: _____
<input type="checkbox"/>	Nominee submitted application	Date: _____
<input type="checkbox"/>	Nominee application reviewed by Board of Directors	Date: _____
Board Action	Elected <input type="checkbox"/>	Rejected <input type="checkbox"/>
		Date: _____