**Volunteer Community Action Council Application**

INSTRUCTIONS for completing and submitting this form: When finished, save the document and send as an email attachment to kdean@tnnonprofits.org. Thank you!

**Full Name**  **Date**

**Preferred Address**

**Preferred Phone**

**Preferred Email**

**Race** *(optional)*  **Ethnicity** *(optional)*

**Gender Identity**

**Employer**

**Position Held**

**Please highlight any of the following skills that you feel you could bring to the board:**

Accounting & Finance Grant writing

Nonprofit capacity building Human Resources

Community Relations/Public Outreach Legal

Fundraising & Event Management Marketing

General Management Real Estate / Facility Planning

Instructional design Community Engagement

Public Policy/Advocacy Other (please specify)

**Affiliations with other organizations**: (Please list name of organization and position in organization)

1.

2.

3.

4.

**Location: Please highlight the location where you reside/work.**

West Tennessee Middle Tennessee East Tennessee

**Please provide the city where you reside:**

**Why would you like to serve on an Advisory Council with Tennessee Nonprofit Network?**

**Please answer the following questions:**

Are you willing to attend an annual virtual joint meeting? Yes No

Are you willing to serve additional hours as needed on ad hoc task forces? Yes No

Do you agree to represent Tennessee Nonprofit Network and all of its nonprofit members regardless of differences in ideology, community served, etc.? Yes No

Please email completed application to Kevin Dean, CEO, Tennessee Nonprofit Network, kdean@tnnonprofits.org.