

GEF BOARD MEMBER APPLICATION FORM

PLEASE CLICK IN THE APPROPRIATE BOXES AND TYPE DIRECTLY INTO THIS FORM



The Grafton Education Foundation(GEF) provides a means for schools, individuals, and businesses to work together to help students achieve their potential by providing financial support through private funding.

APPLICANT INFORMATION

Name:		Date:	
Address:			
Home Phone:		Other Phone:	
Email:			

EXPERIENCE:

EDUCATION	
PRESENT EMPLOYER/ POSITION	
RELEVANT WORK OR EXPERIENCE	
PAST OR PRESENT VOLUNTEERING	

SKILLS OR QUALIFICATIONS:

<input type="checkbox"/> Fundraising	<input type="checkbox"/> Marketing	<input type="checkbox"/> Accounting
<input type="checkbox"/> Event Promotion	<input type="checkbox"/> Event Coordination	<input type="checkbox"/> School Liaison
<input type="checkbox"/> Writing	<input type="checkbox"/> Networking	<input type="checkbox"/> Website

In your own words; why do you feel you would make a good board member for the Grafton Education Foundation?

Please provide two references and their contact information (either phone number or email address).

Name:		Contact Information:	
Name:		Contact Information:	

Email a scanned copy of the completed form to: info@graftoneducationfoundation.org

OR

Print and mail the completed form to: Grafton Education Foundation
1900 Washington Street
Grafton, WI 53024