



**Eagan Foundation Board Member Nomination**

Applicant first and last name:

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Applicant address:

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Applicant city, state, zip:

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Applicant telephones (please specify work or home): \_\_\_\_\_

Applicant cell phone: \_\_\_\_\_

Applicant title and company (if appropriate; if not working, please note “community member”): \_\_\_\_\_

What are the specific skills that the you bring to the Eagan Foundation? (i.e. how do you see them fitting in to the existing structure, what role can they fill?)

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Do you feel that the you have the ability to lead a committee or would you be better suited to a committee membership role? (please select one)

- Would be suited to lead a committee       Would be suited to fill a committee membership role

Please mark all committees/roles that you feel you would be well suited for:

- |                                                                         |                                                |
|-------------------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Chair, Vice Chair or other leadership position | <input type="checkbox"/> Nominations/Volunteer |
| <input type="checkbox"/> Annual Fundraiser Committee                    | <input type="checkbox"/> Scholarship Committee |
| <input type="checkbox"/> Marketing and Public Relations                 | <input type="checkbox"/> Finance               |
| <input type="checkbox"/> Fundraising                                    | <input type="checkbox"/> IT/Infrastructure     |
| <input type="checkbox"/> Community Grants                               |                                                |



Do you have the time to commit to being an effective contributor to the Board? Estimated contribution is an average of 12 hours/month by third year.

Yes     No

Comments: \_\_\_\_\_

Have you sat on other boards? If so, please list: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please note other considerations that you feel are important as you consider serving as a member of the Eagan Foundation Board:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list a reference that you have worked with in a volunteer or professional setting:

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

Relationship: \_\_\_\_\_

Phone number and/or email address: \_\_\_\_\_

Please scan and email your completed form to: [admin@eaganfoundation.org](mailto:admin@eaganfoundation.org)

**Thank you for your interest in the Eagan Foundation!**