



Board of Trustees Application

Thank you for your interest in joining the ARIEL Theatrical Board of Trustees.

Use this form to provide information about yourself that will enable our Board and Staff to understand your talents/strengths as you are considered for future service within our organization. Serving on a board committee is a precursor to becoming an ARIEL Theatrical Trustee. Your interests and areas of expertise are taken into account with all committee placements.

Name: _____

Phone numbers: Cell _____ Work _____

Home address: _____

Email: _____

Briefly describe why you would like to join our Board of Trustees: _____

Please share your current or recent (within three years) organizational affiliations (name of organization and your role):

1. _____
2. _____
3. _____
4. _____

Please identify skills that you could offer the ARIEL Board:

- | | | |
|--|---|--|
| <input type="checkbox"/> Board Development | <input type="checkbox"/> Financial Management | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Marketing | <input type="checkbox"/> Staffing/HR |
| <input type="checkbox"/> Volunteer Management | <input type="checkbox"/> Community Networking | <input type="checkbox"/> Business Sponsorships |
| <input type="checkbox"/> Facilities Management | <input type="checkbox"/> Other _____ | |

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Other skill(s) you would like to utilize in your service: _____

Please share your expectations of Board participation, i.e. anticipate your level of involvement, how your contributions will benefit ARIEL, skills you plan to utilize/develop, etc.: _____

Are you acquainted with any current or former ARIEL Board members? If so, please share names and context: _____

Committee and/or volunteer service is required before a board position is considered. By signing below you agree that you can provide at least 2-4 hours of monthly service (including Board and Committee meeting attendance) and that there are no conflicts-of-interest that will affect your eligibility for board service.

Your signature: _____ Date: _____

If you are not selected as a member of the Board, or if you decide not to join, would you like to be a volunteer to assist our organization in ways that match your skills and interests?

- Yes No Will discuss possibilities