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| **Application For Board Membership**JEWISH RENAISSANCE FOUNDATION |
| Name: | Date of Birth: |
| Occupation: |
| Mailing Address: |
| Home Phone: | Mobile Phone: | Email: |

**YOUR AVAILABILITY TO SERVE**

Could you regularly attend monthly Board meetings? □ Yes □ No

Elected Officials Only – Elect to send delegate □ Yes □ No

Name:

Title:

Contact Phone Number:

Email:

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| **YOUR BACKGROUND:** What education or skills could you contribute to our Board?(please check as many that apply) |
| * Accounting
 | * Management
 | * Public Relations
 |
| * Special Events
 | * Marketing
 | * Human Services
 |
| * Fundraising
 | * Education/Training
 | * Community Relations
 |
| * Legal
 | * Housing
 | * Youth & Families
 |
| * Health
 | * Other
 |
| Have you ever been an employee of the JRF? ⁮ YES ⁮ NO |
| Are any members of your family employed by JRF? ⁮ YES ⁮ NO |
| On what other Boards do you serve? At least 51% of the Trustees shall be consumer board members. A “consumer board member” is a current registered patient of JRF’s health center project, or the legal guardian of a patient who is a dependent child or adult, who in the past 24 months has received at least one or more in-scope services(s) furnished at an in-scope health center project site, which generated a health center visit. Will you be planning on utilizing the Health Center for primary care or dental services? □ Yes □ No  |

 Jaime Rivello, CEO

 Jewish Renaissance Foundation

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