Rock Falls High School Alumni Association Board Member Application
(Term of office: 3 years from June 1 – May 30)

The Mission of the RFHSAA is to:

- Develop opportunities for alumni to remain connected to the community and to each other;
- To encourage charitable contributions to maximize opportunities for student educational development;
- To promote Rock Falls High School and its programs and activities;
- To organize and sponsor networking events within the community by bringing together parents, teachers and community members.;
- To solicit funding and individuals to assist in projects to be undertaken by the RFHSAA.

Please complete and submit either electronically to RFHSAA@RFHS301.org or mail/drop off to Rock Falls High School, 101 Twelfth Avenue, Rock Falls, IL 61071 by ***May 1.***

1. Candidate Name _____

   Home address _____

   Home phone (____) _____-_____ Cell phone (____) _____-_____

   E-mail _____Are you a RFHSAA member? _____

   Preferred method of contact _____

2. Current position, employment, address and work phone number, if applicable

3. Please describe your area of expertise/contribution you feel you can make to further the mission of RFHSAA.

4. What is your connection to Rock Falls High School? What years did you attend RFHS? Did you graduate from RFHS?

5. Please list prior experience serving as a Board Member to other non-profit organizations.

6. What other volunteer commitments do you currently have?

7. RFHSAA Board of Directors meets monthly on third Thursday at 6:00 p.m. Meetings usually last around one hour. Do you have any standing commitments that create a scheduling conflict for you? Yes _____ No _____

8. Why are you interested in serving as a Board member of RFHSAA?

9. Please share any other information you feel important for consideration of your application to serve as a RFHSAA Board Member.

For office use::

_____ Nominee has had personal meeting with officer or Board member Date: _____

_____ Nominee reviewed by committee. Date: _____

Board action: Elected _____. Rejected _____. Date: _____