

REFERRAL FOR SERVICE ON NONPROFIT GOVERNING BOARD
StrengthenND®

Board Nominee Name: _____

Contact phone/email: _____

Company/Organization/Title/Occupation _____

Has the nominee expressed interest in our purpose and why would this individual be a good addition to our governing board?

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Has the nominee expressed interest in our purpose and why would this individual be a good addition to our governing board?

PROVIDED BY: _____ PHONE: _____

EMAIL: _____ BEST TIME TO CONTACT: _____

Would you be interested in exploring possible board membership for yourself? Yes -- No

Is there any other way you would like to contribute your time or expertise to our nonprofit?

If you would like to be added to any of our mailing lists, please indicate below:

--- Newsletter

---- Annual Report

Please send the information as selected to my preferred email address: _____