

# **Animal Alliance of Greater Syracuse**

## **Application for Board of Directors**

PO Box 94, Liverpool, NY 13088

Email: [aags@twcny.rr.com](mailto:aags@twcny.rr.com)

Website: [www.animalallianceofgreatersyracuse.org](http://www.animalallianceofgreatersyracuse.org)

Animal Alliance of Greater Syracuse (AAGS) is a non-profit animal welfare advocacy organization whose mission is to make Central New York a safer, more humane home for animals and the people who care for them. If this is your mission too, and you are interested in being considered for the AAGS Board of Directors, please complete the following application. Please note that completion of this application does not ensure an offer to a position on the board.

### **Applicant Profile (Please print)**

Name: \_\_\_\_\_ Are you 21 or older? Yes\_\_\_ No\_\_\_  
Street Address: \_\_\_\_\_ Email\*: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Home telephone: ( ) \_\_\_\_\_  
Daytime telephone: ( ) \_\_\_\_\_ Cell phone: ( ) \_\_\_\_\_

How did you learn of AAGS? \_\_\_\_\_

Why do you want to be considered for the AAGS Board of Directors?

---

---

---

---

Have you ever done any volunteer work for AAGS or other non-profit organizations? Yes\_\_\_ No\_\_\_

Where? \_\_\_\_\_ When? \_\_\_\_\_

Type of work: \_\_\_\_\_

Do you have a valid Driver's License? Yes\_\_\_ No\_\_\_

Have you ever been convicted of a crime? Yes\_\_\_ No\_\_\_ If yes, please explain:

---

---

### **References:**

Name: \_\_\_\_\_ Home telephone: ( ) \_\_\_\_\_  
Street Address: \_\_\_\_\_ Cell phone number: ( ) \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

Name: \_\_\_\_\_ Home telephone: ( ) \_\_\_\_\_  
Street Address: \_\_\_\_\_ Cell phone number: ( ) \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

### **In case of emergency** whom should we notify?

Name: \_\_\_\_\_ Home telephone: ( ) \_\_\_\_\_  
Street Address: \_\_\_\_\_ Cell phone number: ( ) \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

## **AAGS - Board of Directors Application** (cont'd)

### Experiences/Skills

What skills and knowledge can you bring to our board? Please indicate your experience in the following areas:			
<b>Skill</b>	<b>Very Experienced</b>	<b>Some Experience</b>	<b>No Experience</b>
Strategic planning			
Fundraising			
Board Development			
Recruitment			
Program Planning & Evaluation			
Recruiting, Hiring, & Evaluating			
Financial Management			
Communication & Public Relations			
Public Speaking			
Organizational			
Information Technology			
Writing, Journalism			
Special Events			
Legal Issues			
Maintenance			

Please tell us about any additional special skills and/or qualifications you may have. These may be from your jobs, volunteer work, hobbies, sports, etc.

---



---



---

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

By submitting this application:

\* I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a member of the Board of Directors, any false statements, omissions, or other representations made by me on this application may result in my immediate dismissal.

\* I understand that the completion of this application does not guarantee an offer to join the Board.

Name (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### **To return this completed application you may:**

\* Mail it to us at AAGS, PO Box 94, Liverpool, NY, 13088.

\* Scan and email it to [aags.bod@gmail.com](mailto:aags.bod@gmail.com).

For more information, please email: [aags.bod@gmail.com](mailto:aags.bod@gmail.com) or visit [www.animalallinaceofgreatersyracuse.org](http://www.animalallinaceofgreatersyracuse.org).

For AAGS Use Only: Dates Application was: Received \_\_\_\_\_ Reviewed \_\_\_\_\_ Initials \_\_\_\_\_  
 Dates References were Checked \_\_\_\_\_ Initials \_\_\_\_\_ Application Approved \_\_\_\_\_ Initials \_\_\_\_\_