FIRST UNIVERSALIST LEADERSHIP APPLICATION

Applications must be received by February 3, 2017. Submit to:

Application for (check one or mor	re):			
Board of Trustees	Foundation Box	ard	Nominating Commi	ttee
Contact information (One preferred	d telephone number	and e-mail is req	juired)	
Phone number 1:	(H / W / M)	Phone Numbe	r 2:	(H / W / M)
E-mail address:				
What year (approximately) did you	ı join First Universal	ist?		
Please answer the following quest needed.	ions. We appreciate	a brief response	e; you may use additio	onal paper if
Describe your past involvement with have had.	th First Universalist,	with an emphas	is on any leadership r	oles you
Provide other professional, volunte which you are applying. If applying other Board or committee experien	g for the Board of Tr	ustees or Found	ation Board, be sure to	•
Describe your goals related to this What do you hope to contribute?	position. Why are yo	ou interested in b	ecoming a member of	f this group?
What racial justice trainings have y the past five years?	ou attended through	First Universali	st Church or other org	ganizations in
Date:		Name		