



APPLICATION FOR BOARD OF DIRECTORS

DATE: _____

Name		
Home Address		
Phone (work)	(cell)	E-mail
Company Name & Address		
How long?	Industry:	

Please describe your current involvement with the Greater Hernando County Chamber of Commerce and why you want to serve on the Board of Directors?

Please describe your community involvement.

Are you currently serving on another organization's Board of Directors?

When does your term expire? _____

Will you be able to attend the monthly Board Meetings? _____

How many hours a month can you reasonably serve? _____

Have you been convicted of a felony? No Yes; if yes, please explain

Is there anything in your past that would damage the reputation of the Greater Hernando County Chamber of Commerce? No Yes; if yes, please

explain: _____



Below are the Chambers Pillars of Success. What skills and knowledge are you willing to bring to our board? Please indicate your experience

	very experienced	some experience	none
Networking			
Marketing			
Training			
Advocacy			

If there is any additional information please include as an attachment to your application.

Please include a copy of your *professional resume* and return with application to:

Morris Porton
 President/CEO
 Greater Hernando County Chamber of Commerce
 15588 Aviation Loop Drive
 Brooksville, FL 34604

 Signature Date