



## Board of Directors Application Form

Thank you for your interest in joining the Fauquier Community Child Care Board of Directors.

Fauquier Community Child Care, Inc. (FCCC) seeks to be the preeminent leader in child care services in Fauquier County. FCCC provides continuous high quality, affordable, accessible, safe child care to meet the out-of-school needs of children being supported in Fauquier County Public Schools within nurturing environments that encourage children to grow, interact and play. FCCC also supports other providers and services to improve child care for all youth and children within child care programs in Fauquier County.

FCCC is licensed under the Virginia Department of Education and complies with the standards for licensed child day centers. Volunteers must submit to a Criminal Records Check.

The following information will be shared with the FCCC Board of Directors for consideration.

Your name: \_\_\_\_\_

Primary Contact Number: \_\_\_\_\_ Secondary Contact number: \_\_\_\_\_

Your address: \_\_\_\_\_

\_\_\_\_\_

Your email address:

\_\_\_\_\_

Current Employer:

\_\_\_\_\_

Position/Title/Profession:

\_\_\_\_\_

Briefly describe why you would like to join our Board of Directors:

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Your current organizational affiliations (names of the organization and your role(s):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Which of your skills would you like to utilize on the Board? Check those that apply:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Board development   | <input type="checkbox"/> Financial management | <input type="checkbox"/> Training              |
| <input type="checkbox"/> Strategic planning  | <input type="checkbox"/> Fundraising          | <input type="checkbox"/> Marketing             |
| <input type="checkbox"/> Staffing / HR       | <input type="checkbox"/> Evaluation           | <input type="checkbox"/> Volunteer management  |
| <input type="checkbox"/> Program development | <input type="checkbox"/> Community networking | <input type="checkbox"/> Facilities management |

Other skill(s) of yours that you would like to utilize? \_\_\_\_\_

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What would you like to get for yourself out of your participation on the Board, e.g., what types of experiences, skills to develop, interests to cultivate for you, etc.?

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If you join the Board, you agree that you can provide at least 2-4 hours a month in attendance to Board and Committee meetings, and that you do not have any conflict-of-interest in participating on the Board.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you are not selected as a member of the Board, or if you decide not to join, would you like to be a volunteer to assist our organization in various ways that match your skills and interests?

Yes

No

Perhaps