

## **BOARD OF DIRECTORS APPLICATION**

Date of Application:		
Name:		
	Phone:	
Home Address	E-mail:	
Occupation:		
	Phone:	
Business Address	E-mail:	
How many years have you resided in our community?		
Do you have a student that is a currently enrolled in classes at the Pacific School of Dance or a member of Ballet Pacific?		
Please list any prior experience working with non-profits or on a board of directors.		
What strengths, skills, and/or education do you have that will help you in your role as a member of the Board?		



Why do you want to serve as a member of the DUSCO Board of Directors?		
Any other feedback or comments to include in this application?		
REFERENCES		
Name:	Name:	
Address:	Address:	
Occupation:	Occupation:	
Phone and email:	Phone and email:	
CERTIFICATION OF APPLICATION		
I hereby certify that the above information is true and correct. I also authorize DUSCO Board of Directors to verify information contained in this application.		
Signature:	Date:	
Return application to: DUSCO PO Box 1171 Coos Bay OR 97420		

Email: leberti.kim@gmail.com