## **Board Member Worksheet**

Organization Name:			
Program Name:			
Complete list of organiz	zation's current Board or g	overning me	embers (officers identified). Information must
	-	•	ion, profession, qualification, race, gender,
	s/formerly homeless status		, p, qua,, genue.,
etimicity, and nomeless	3/10/11/erry florifeless status	J.	
Mr./Ms.:	First Name:		Last Name:
Office Held:	Term of Office:		Compensation:
Profession:		Qualification:	
Race:	Gender:		Ethnicity:
Address: Enter address			Etimoty.
Addiess. Enter address	noro		
Mr./Ms.:	First Name:		Last Name:
Office Held:	Term of Office:		Compensation:
Profession:		Qualification:	
Race:	Gender:		Ethnicity:
Address: Enter address	here		
Mr./Ms.:	First Name:		Last Name:
Office Held:	Term of Office:		Compensation:
Profession:		Qualification:	
Race:	Gender:		Ethnicity:
Address: Enter address	here		•
<u> </u>			
Mr./Ms.:	First Name:		Last Name:
Office Held:	Term of Office:		Compensation:
Profession:		Qualification:	•
Race:	Gender:		Ethnicity:
Address: Enter address			
Mr./Ms.:	First Name:		Last Name:
Office Held:	Term of Office:		Compensation:
Profession:		Qualification:	
Race:	Gender:		Ethnicity:
Address: Enter address			Etimicity.
Address. Enter address	nore		
NA. /NA	First Name		Leef Name
Mr./Ms.:	First Name:		Last Name:
Office Held:	Term of Office:		Compensation:
Profession:		Qualification:	
Race:	Gender:		Ethnicity:
Address: Enter address	here		

## **Board Member Worksheet**

Mr./Ms.:	First Name:	Last Name:		
Office Held:	Term of Office:	Compensation:		
Profession:		Qualification:		
Race:	Gender:	Ethnicity:		
Address: Enter address	here			
Homeless/Formerly Hor	meless? Yes:  No:			
Mr./Ms.:	First Name:	Last Name:		
Office Held:	Term of Office:	Compensation:		
Profession:		Qualification:		
Race:	Gender:	Ethnicity:		
Address: Enter address	here			
Homeless/Formerly Hor	meless? Yes: No:			
Mr./Ms.:	First Name:	Last Name:		
Office Held:	Term of Office:	Compensation:		
Profession:		Qualification:		
Race:	Gender:	Ethnicity:		
Address: Enter address				
Homeless/Formerly Hor	meless? Yes:  No:			
Mr./Ms.:	First Name:	Last Name:		
Office Held:	Term of Office:	Compensation:		
Profession:		Qualification:		
Race:	Gender:	Ethnicity:		
Address: Enter address	here			
Homeless/Formerly Hor	meless? Yes:  No:			
Mr./Ms.:	First Name:	Last Name:		
Office Held:	Term of Office:	Compensation:		
Profession:		Qualification:		
Race:	Gender:	Ethnicity:		
Address: Enter address				
Homeless/Formerly Hor	meless? Yes:  No:			
Mr./Ms.:	First Name:	Last Name:		
Office Held:	Term of Office:	Compensation:		
Profession:		Qualification:		
Race:	Gender:	Ethnicity:		
Address: Enter address here				
Homeless/Formerly Hor	meless? Yes: □ No: □			