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Wesley House Family Services Board/Associate Board Application

All information is kept confidential.

I. Contact and Personal Information:

NAME: _____
First
Middle
Last

HOME ADDRESS: _____ HOME PHONE: _____

_____ CELL PHONE: _____

WORK ADDRESS: _____ WORK PHONE: _____

PROFESSION / OCCUPATION: _____

E-MAIL ADDRESS: _____

MONROE COUNTY RESIDENT SINCE: _____

IF PART-TIME RESIDENT, PLEASE INDICATE WHERE: _____

ETHNIC DECLARATION: _____

(African American, Caucasian, Hispanic/Latino, Other - please specify)

Mission Statement:

**Promoting and enhancing the safety, well-being and development of children
by educating, supporting and meeting the needs of families.**

The goals of the Agency are:

- A. To offer and support the development of affordable, accessible, quality services for children and for families;
- B. To offer intensive in-home family support services to strengthen parenting skills, to build strong family relationships, to prevent abuse, neglect and deprivation, and to intervene with families to prevent the removal of children from the home and to stabilize the family so that further government involvement does not occur;
- C. To advocate for and meet the needs of children most at risk; and
- D. To offer services to improve the lives of persons throughout community served.

II. Please provide a brief response to the following: (Separate sheet may be attached.)

A: Describe your interest in children/family services in our community:

B. Why do you want to be involved with Wesley House Family Services at a Board level?

III. CURRENT / PREVIOUS ORGANIZATION MEMBERSHIPS:

➤ If more convenient, please attach your Resume.

	<u>ORGANIZATION NAME</u>	<u>INVOLVEMENT DATES</u>	<u>POSITIONS HELD</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

IV. BIOGRAPHICAL MATRIX:

To better gauge your community connections, where you would be able to help Wesley House Family Services the most, and the areas you would be interested in helping out, please place an "X" beside the following items that apply to you.

Community Connections (check all that apply)	"X"
Business	
Education	
Media	
Philanthropy	
Political	
Religious Organizations	
Social Service Organizations	
Government	
Medical	
Public Safety	
Technology	
Retired	
Other (please specify):	

Experience/Skills (check all that apply)	“X”
Grants Development	
HR: Personnel, etc.	
Risk Management	
Financial Oversight	
Leadership Skills	
Volunteer Coordination	
Marketing & Public Relations	
Technology	
Service Agency Experience	
Multi-Lingual (please specify):	
Nonprofit Management	
Public Speaking/Media Experience	
Strategic Planning	
Events Planning	
Legal	
Arts & Culture	
Other (please specify):	

Where would you like to help? (indicate all interests)	“X”
Board Leadership	
Volunteer Development	
Marketing & Public Relations	
Technology	
Promoting Mission	
Public Speaking/Media Presentations	
Strategic Planning	
Financial Oversight	
Fund Raising	
Events Planning	
Grants Development	
Legal	
Policy Development	
Other (please specify):	

Please designate at least one category which would best reflect your interest as a Board member:

- Community-At-Large (business or community involvement) (CAL)
- Community Served (parent, guardian, foster parent) (CS)
(Does not necessarily mean you are receiving services from Wesley House)
- United Methodist Church (church member) (CM)

V. BOARD MEMBER REPRESENTATION:

Wesley House Family Services Board members should possess two or more of the following qualities, and the complete Board should reflect all of the following qualities:

- Knowledge of the community served;
- Skills and experience in developing policy;
- Leadership ability;
- Public recognition and respect; and
- Commitment and ability to fundraise or to connect the organization with other resources.

Board of Directors: Board Members are any person interested in accomplishing the Mission and Goals of the Agency. Board members shall do all things they feel proper for the fulfillment of the stated purposes of the Agency. The Directors shall make decisions in keeping with the highest standards of moral and ethical behavior, sound fiduciary judgment, and with due regard to the interests of regulatory authorities, affiliations, contract obligations, and community interest and client welfare. Participate in all efforts to secure revenue and resources for the Agency. The term is three years. Attendance at monthly Board meetings is required. All Directors shall be 18 years of age or more. Each Director shall serve on at least one Standing Committee.

Associate Membership: Associate Board members are interested in accomplishing the Mission and Goals of the Agency and assist the Agency in broadening financial and community support of the Agency. The term is two years. Attendance at monthly Board meetings is not required but preferred. Associate Board Members may attend Board Meetings but do not have a vote and do not count in the establishment of the quorum. Each Associate Member is encouraged to serve on at least one Standing Committee.

I ATTEST TO THE VALIDITY OF ALL INFORMATION ON THIS APPLICATION AND, UPON APPOINTMENT, AGREE TO THE TERMS OF BOARD MEMBER RESPONSIBILITY.

Signature

Print Name

Date

For Agency Use Only:

Application for Board Membership: Yes *Acceptance Date:* _____

Application for Associate Board Membership: Yes *Acceptance Date:* _____

Indicate effective dates and changes to membership: