



Application for Membership on the Halifax Community College Foundation Board

Personal Information

| | |
|------------------------|---|
| Prefix | <input type="radio"/> Dr. <input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms. |
| Full Name | |
| Mailing Address | |
| City | |
| State | |
| Zip | |
| Email Address | |
| Telephone | |

Professional Information

| | |
|------------------------|--|
| Job Title | |
| Employer | |
| Mailing Address | |
| City | |
| State | |
| Zip | |
| Email Address | |
| Telephone | |

Board Experience

| Questions | Your Responses |
|---|-----------------------|
| Why are you interested in serving on the HCC Foundation Board? | |
| Please describe your experience with serving on nonprofit organization boards. | |
| Please describe your experience with fundraising. | |

Signature

Date

Please type, sign and submit the application to **Executive Director of Foundation, Halifax Community College, 100 College Drive, P.O. Drawer 809, Weldon, NC 27890.**

We will contact you within three business days to discuss your application. Thank you!