

# The Greater Crofton Chamber of Commerce Board of Directors Application

To submit your application, please complete the information below and submit by \_\_\_\_\_.

Please email your completed application to [boardpresident@croftonchamber.com](mailto:boardpresident@croftonchamber.com)

## Applicant Information

### Name

First

Last

Suffix

### Company Name

### Title/Position

### Length of time in this position

### Type of Business

### Length of time with your company

### Number of Employees

*FTE = 1 , PTE = 1/2*

### LinkedIn Profile

### Company Address

Address Line 1

Address Line 2

City

State

Zip Code

### Phone (direct/extension)

### Email

### Assistant's Name (if applicable)

First

Last

Suffix

### Assistant's Phone

### Assistant's Email

**Please provide brief responses to the following questions**

**(1) Why do you desire to serve as a Greater Crofton Chamber of Commerce Board of Director?**

**(2) What makes our mission meaningful to you?**

**(3) What skills, resources, and/or connections do you have to offer and are willing to use on behalf of the organization?**

**(4) List your current or past Board of Director's affiliation(s)**

## Identify your leadership or practical experience in any of the following areas

- **Finance**

- **Personnel/HR**

- **Marketing/Public Relations**

- **Sales and Business Growth**

- **Information Technology**

- **Strategic Orientation**

**All applicants are encouraged to bring a list of three or more questions to the in-person interview.**