



## Prospective Board Member Profile

### Contact Information:

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Profession: \_\_\_\_\_ Company: \_\_\_\_\_

### Preferred Contact Information:

Phone Numbers Work: \_\_\_\_\_ Home or Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Do you currently have a child/ren attending a BASCOL Program? YES or NO

What experience and/or Knowledge of BASCOL do you have?

Relevant Work Experience, Education, Community Affiliations and/or Not for Profit Experience that would enable you to be a contributing member of the Board:

Please return to: Chere Petrivelli, Executive Director, BASCOL, 4610 Wetzel Road, Liverpool, NY 13090. E-mail: [cpetrivelli@bascol.org](mailto:cpetrivelli@bascol.org)