



Bethel Recreation Association
 PO BOX 4250 – Spanaway, WA 98387
 Phone: (253) 800-4300 ☎ Fax: (253) 800-4398
 Website: bethelrec.org ☎ Email: bethelrecinfo@bethelrec.org

OFFICE USE ONLY	
Date Received:	_____
Date Reviewed:	_____

Board of Directors Candidate Application

Return this application to (scan/email) bethelrecinfo@bethelrec.org, fax (253) 800-4398 or mail (PO Box 4250 – Spanaway, WA 98387)

CANDIDATE INFORMATION

FIRST NAME		LAST NAME		MI	M F	BIRTHDATE / /	
STREET ADDRESS		APT	CITY		STATE		ZIP
SHIRT SIZE	PRIMARY PHONE	SECONDARY PHONE		EMAIL			

Position you are applying for: _____ Date Available: _____

Are you a citizen of the United States? Yes No If no, are you authorized to work in the U.S.? Yes No

Have you ever worked for this company? Yes No If yes, when? _____

Have you ever been convicted of a felony? Yes No If yes, explain: _____

CURRENT EMPLOYMENT

COMPANY		JOB TITLE		SUPERVISOR		PHONE	
ADDRESS		UNIT	CITY		STATE		ZIP
FROM	TO	RESPONSIBILITIES					
COMPANY		JOB TITLE		SUPERVISOR		PHONE	
ADDRESS		UNIT	CITY		STATE		ZIP
FROM	TO	RESPONSIBILITIES					

Please list boards and committees that you serve on, or have served on (business, civic, community, fraternal, political, professional, recreational, religious, and social).

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list any additional education, training or certificates.

Education	Training	Certificates
_____	_____	_____
_____	_____	_____
_____	_____	_____

Optional – Have you received any awards or honors that you'd like to mention?

How do you feel **Bethel Rec.** would benefit from your involvement on the Board?

Skills, Experience and Interests (Please check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Finance/Account | <input type="checkbox"/> Education/Instruction |
| <input type="checkbox"/> Personnel/Human Resources | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Administration/Management | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Non-profit Experience | <input type="checkbox"/> Fundraising/Sponsorship |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Outreach/Advocacy |
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Program Development | |
| <input type="checkbox"/> Public Relations/Communications | |

Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of **Bethel Recreation Association**.

Please tell us anything else you'd like to share.

I certify that the information above is true and complete to the best of my knowledge. If this application leads to board membership, I understand that false or misleading information in my application may result in my release from the Bethel Recreation Board of Directors.

Candidate Signature

Date