

The mission of the New Jersey Coalition Against Sexual Assault (NJCASA) is to promote the compassionate and just treatment of survivors, their loved ones and significant others, foster collaborative relationships between community systems, and affect attitudinal and behavioral changes in society as we work toward the elimination of sexual violence against all people.

## **Application for NJCASA Board of Trustees**

To apply to become a member of the Board of Trustees for the New Jersey Coalition Against Sexual Assault (NJCASA) please complete this application and return it, along with attachments, to NJCASA via mail or email to:

NJCASA **Email:** <u>info@njcasa.org</u> 3150 Brunswick Pike, Suite 160 Lawrenceville, NJ 08648-2420

Name:
Home Address:
County of Residence:
Home Telephone #:
Cell #:
Email Address:
Current Employer and Title:
Address:
Telephone #:
Email Address:
If you have access to fax please provide fax #:
Do you prefer contact via home or business email?
Do you prefer contact via home, business or cell #?
Information on noteworthy prior personal or professional experience or accomplishments:
What academic degrees, certifications or licenses do you currently hold?
Please attach a copy of your resume.
Education, skills, or experience you could contribute to the Board and appropriate explanation or information:
[] Accounting/Financial/Investment
[] Community Relations
[] Event Planning
[] Fundraising
[] Governance
[] Human Resources





[] Issue Advocacy
[]Law
[] Management/Nonprofit Leadership
[] Marketing
[] Public Speaking
[] Elected or Appointed Office
[] Strategic Planning
Other:

## On which boards have you/do you serve?

Organization	Dates Served	Offices / Committees

To which other organizations do you belong?
Community/Civic:
Educational:
Religious:
Political:
National:
International:
Other:

Would	you	be	willing	to	help	build	а	collaborative	partnership	between	NJCASA	and	any	of	the	above
organiz	ation	s? I	f so, wł	nich	one(	s)?										





Would you be able to attend monthly committee meetings, either in person or via telephone?

[]Yes []No	If not, what would be the likely conflict(s)?
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Please indicate a ranked (1-3) preference for committee membership:

- [] Finance
- [] Fundraising
- [] Governance

Are you willing and able to actively attend, support, and contribute to fundraising activities	? [] Yes [] No
Are you willing and able to financially contribute to NJCASA? [] Yes [] No	

Why are you interested in joining the NJCASA Board of Trustees?

What are you hoping to experience by becoming a member of the Board of Trustees?

After reviewing the Mission Statement above, what is your personal interest in being affiliated with NJCASA?





Please set forth your personal view and opinion concerning the following issues:

Sexual Violence:	
Feminism:	
-	
-	
-	
Public/Political Advo	cacy:
-	
-	
-	
NJCASA Board of T	mation about any possible conflicts of interest you may have if you are elected to the rustee, including personal, professional or business relationships with current NJCASA
Trustees, Staff, or P	rogram Members:
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## **Board Candidate Affirmation**

I hereby affirm that I have never been charged with or convicted of any crime of violence against another person or of any crime involving moral turpitude in this state or in any other state or federal or international jurisdiction. For purposes of this affirmation I understand that "crime of violence" or "crime involving moral turpitude" includes, but is not necessarily limited to: murder, manslaughter, robbery, burglary, sexual assault, rape, stalking, criminal sexual contact, child abuse or endangerment, domestic violence, lewdness, perjury, false swearing, forgery, theft or theft-related crimes. \_\_\_\_\_ (initial)

I hereby affirm that I have never had a professional license or certification challenged, suspended, or revoked. \_\_\_\_\_ (initial)

Please explain any and all reasons why you may not be able to affirm the above statements.

Print full name:

Signature of Candidate: \_\_\_\_\_

Date of Birth:

Date: \_\_\_\_\_

