

Call to Safety (formerly the Portland Women's Crisis Line)

PO Box 42610
Portland, OR 97242-1610



Board Member Application

Name: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

May we contact you at work? Yes No Email Address: _____

Please answer the following questions:

1. Will you commit to attending the Basic Advocacy Training sessions related to our mission (15 hours during your first year of service)? Y N

2. Will you commit to a minimum 8-10 hours per month for meetings and projects? Y N

3. There are a lot of great organizations in Portland. What drew you to apply specifically with Call to Safety's Board of Directors?

4. How did you hear about Call to Safety?

5. Do you have any personal or professional relationships with Call to Safety and/or its members which could be construed as a conflict of interest? If so, please explain.

6. Call to Safety is dedicated to working towards anti-racism as an agency. What does anti-racism mean to you? How do you demonstrate this value in your life?

7. Call to Safety has a history rooted in feminism, social justice and empowerment. Can you provide examples of how these values have presented in either your personal or professional life?

8. We have a union at Call to Safety. What do you see as the benefits and challenges of working with a unionized staff as a Board member?

9. What skills, relationships, and affiliations would you bring to the board?

10. Have you had any prior board and/or volunteer experience? If so, please describe. Are you currently on any other boards? If so can you provide an example of how your board service supported the services of a non-profit and/or staff of a non-profit.

Please read the following statement and sign your name below.

I have read the Call to Safety Board Member Job Description and understand the expectations described within it. I have also reviewed Call to Safety's Statement of Core Values and am committed to upholding these values as a volunteer board member for the agency.

Signature: _____ Date: _____

*Thank you for taking the time to complete this application. Please **attach your resume.***

FOR AGENCY USE ONLY

Nominee has had a personal meeting with either executive director, board chair, or other board member.

Date _____

Nominee reviewed by the executive committee. Date _____

Nominee attended a board meeting. Date _____

Applicant approved as board member? Y N