MIS Cares Executive Committee Application

MIS Cares is a donor advised fund of the NASCAR Foundation, a 501(c)(3) non-profit entity. The Mission of MIS Cares and The NASCAR Foundation is to create a lasting, positive impact through charitable giving and volunteer efforts that cultivates community growth and advances quality of life.

For more information about what we're doing in the community please visit our website: www.MISpeedway.com/MISCares

Please note: The MIS Cares Executive Committee members receive no compensation, all board members serve on a volunteer basis.

To be considered for the MIS Cares Executive Committee you must live and/or work in Jackson and/or Lenawee Counties.

Please return your completed application MIS Cares at the address below, by January 15, 2014.

MIS CARES
ATTN: JAYME BICKNELL
12626 US HIGHWAY 12
BROOKLYN MI 49201

PERSONAL

First Name: _____ Last Name: _____

Street Address:_____

City:_____State:_____Zip Code:_____

Phone: (_____)-_____-_____ Email:_____

EMPLOYMENT

Current Employer_____ How long have you worked here? _____

Street Address:_____

City:_____State:_____Zip Code:_____

Job Title: _____ Work Phone: (_____)-_____-_____

Supervisor Name: _____ Supervisor Phone: (_____)-_____-_____

EDUCATION

High School Name: _____ Did you graduate? (Y / N)

College Name: _____ Did you graduate? (Y / N)

If yes, what was your major? _____

Please answer the following questions.

Why are you interested in serving on the MIS Cares Executive Committee?

_____

_____

_____

_____

_____

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

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Please tell us what this community means to you.

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Please describe your experience with fundraising.

_____

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_____

Skills, experience and interests (Please circle all that apply)

Finance, accounting	Policy development	Grant reviewing
Personnel, human resources	Program evaluation	Fundraising
Administration, management	Public relations, communications	Outreach, advocacy
Nonprofit experience	Education, instruction	Other _____
Community service	Special events	Other _____

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

_____

_____

_____

Signature: _____ Date: ____ / ____ / _____

Print Name: _____