

National Catholic Office for the Deaf

Potential Board Member's Profile

Three Year Term (June 1 to May 31)

Your Name _____

City, State _____

Place of Employment _____

Job Title _____

Phone Number _____ voice TTY VP

Fax Number _____ Email _____

Have you served on any board before ____ Yes (List Below) ____ No

List of Organizations on whose board you have served:

NCOD is looking for individuals with some of the following background to serve on its board.
Please number them based on your strength and experience.

1= Very strong 2= Strong 3= some experience 4= no experience

____ Finance	____ Publicity/Marketing	____ Fundraising
____ Grant Writing	____ Administration	____ Business Planning
____ Sales	____ Project Coordinator	____ Religious Education
____ Theology	____ Ministry Formation	____ Bylaws/Constitution
____ Computer Systems/Technology	____ Website Management	
____ Other _____		

Please give any additional information as to how you might best serve the National Catholic Office for the Deaf as a Member of the Board of Directors.

Return by February 15, 2010 to:

NCOD Board Nominations 7202 Buchanan Street Landover Hills, MD 20784