



**Foundation Board of Directors Application**

*(Please complete entire form. Thank you)*

Name: \_\_\_\_\_

Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Check (Work\_\_\_ / Home\_\_\_ )

Phone (W): \_\_\_\_\_ Phone (H): \_\_\_\_\_

E-mail: \_\_\_\_\_

Place of employment: \_\_\_\_\_

Occupation / Title: \_\_\_\_\_

Please summarize your experience with the Harbor Hospice Foundation and explain why you are interested in serving as a board member:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please check area(s) of expertise/contribution you feel you can make to further our mission:

\_\_\_ Fundraising

\_\_\_ Special Events

\_\_\_ Donor Development/Relations

\_\_\_ Policy Development

\_\_\_ Strategic Planning

\_\_\_ Business/Corporate

\_\_\_ Finance

\_\_\_ Law

\_\_\_ Personnel/Human Resource

\_\_\_ Health Care Program Knowledge

\_\_\_ Marketing/Public Relations

\_\_\_ Past Consumer of Hospice services

\_\_\_ Other \_\_\_\_\_

For those items you checked, please provide details: \_\_\_\_\_

---

---

---

---

If there are any additional skills or areas of expertise that you have that you feel would support our vision and values of the Harbor Hospice Foundation, please explain: \_\_\_\_\_

---

---

---

---

If not described above, please outline your experience working on boards and/or other experience in community service. Please indicate whom we may contact for information about your performance in these positions: \_\_\_\_\_

---

---

---

---

***Thank you for your interest in joining the Harbor Hospice Foundation Board of Directors!***



President & CEO

Completed forms, email to Richard Vanderputte-McPherson [RVanderputte@HarborHospiceMI.org](mailto:RVanderputte@HarborHospiceMI.org)  
Or mail to:

**Harbor Hospice Foundation**

**Attn: Board Application**

**1050 W. Western Ave. Suite 400, Muskegon, MI 49441**