



RETURN COMPLETED APPLICATION:

South King Tool Library
info@SouthKingTools.org
1700 S 340th St
Federal Way WA 98003
253-237-2290

SOUTH KING TOOL LIBRARY (SKTL) BOARD APPLICATION

Date _____

Name _____
First MI Last Familiar name

Address _____

Phone _____ E-mail _____

Employer

Name _____

Your title _____

Address _____

Phone _____ E-mail _____

Type of business or organization _____

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

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

Education/Training/Certificates

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

How do you feel SKTL would benefit from your involvement on the Board?

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

- | | |
|---|---|
| <input type="checkbox"/> Finance, accounting | <input type="checkbox"/> Education, instruction |
| <input type="checkbox"/> Personnel, human resources | <input type="checkbox"/> Special events |
| <input type="checkbox"/> Administration, management | <input type="checkbox"/> Grant writing |
| <input type="checkbox"/> Nonprofit experience | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Community service | <input type="checkbox"/> Outreach, advocacy |
| <input type="checkbox"/> Policy development | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Program evaluation | |
| <input type="checkbox"/> Public relations, communications | |

Please list any groups, organizations, or businesses that you could serve as a liaison to on behalf of SKTL.

Please tell us anything else you'd like to share.

Thank you for applying.