



**Teaching Tree**  
Early Childhood Learning Center

**Application for Board Membership**

We wish to consider you for membership in our Board of Directors. Please fill out the form below.

Name \_\_\_\_\_ Date \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ zip code \_\_\_\_\_

Home telephone \_\_\_\_\_ Business telephone \_\_\_\_\_

Business address \_\_\_\_\_

E-Mail address \_\_\_\_\_

How long have you lived in the Fort Collins/Loveland area? \_\_\_\_\_

Occupation \_\_\_\_\_

Business or professional training \_\_\_\_\_

Organizations to which you belong \_\_\_\_\_

Community involvement/Volunteer work \_\_\_\_\_

Major interests and hobbies \_\_\_\_\_

Special interests relating to child care \_\_\_\_\_

Experience relevant to board participation \_\_\_\_\_

Yes, I want to be a member of the board of directors.

Signature \_\_\_\_\_