

Board of Young Professionals Interest Form

Name :		Date:
Address:		
Phone Number(s):	(H)	
	(C)	
	(W)	
Email Address:		
Employer:		
Position:		
Age Range? o 22-25 o 26-30 o 31-35	Ethnicity?	Gender? o Male o Female
Skills?	Profession?	 Interests? Young Professionals Board (If yes, please complete the reverse side of this form) Volunteer for project organized by the Young Professionals Board Volunteer at a SCAN event Serve on a SCAN Committee

Fundraising

Learn more about what SCAN does

o Have coffee/lunch with the Executive Director

o Collect school/craft supplies and healthy snacks

o Tour the Child's Advocacy Center

Host a Parenting Workshop

Research Evaluation

Marketing/PR

Public Speaking

Training

o Writing

Leadership

Labor

Legal

Media

Sales

Religious

Philanthropist

Social ServicesVolunteerOther

What qualities and/or skills do you feel you could bring to SCAN	's Board of Young Professionals?
Why are you interested in serving on SCAN's Board of Young P	rofessionals?
Are you involved in any other organizations? If so please state the involvement.	ne organization and the extent of your
How did you hear about the opportunity to become involved with	SCAN's Board of Young Professionals?
Would you be interested in leading a committee? Yes or No	
By virtue of my signature below, I certify that I have read, unders in the description of SCAN's Board of Young Professionals.	stand and agree to the commitment as outlined
Applicant's Signature	 Date

Please return this form to: **Greater Richmond SCAN** 103 E. Grace Street Richmond, VA 23219 Fax: (804) 257-7109

Email: kread@grscan.com

For more information and additional copies of this form, please visit www.grscan.com or contact SCAN at (804) 257-7226.