New Castle County Office
404 Larch Circle
Wilmington, DE 19804
302.999.7394
Toll-free Statewide
888.547.4412
www.picofdel.org

Board of Directors Application

We are pleased to learn of your interest in serving on our nonprofit board of directors.

Name (Last, First, MI) __ _____

Occupation _____ _____

Employer ____ _____

Work Address _____

City _____ State _____ Zip_____

Work Telephone _____ Work Fax #_____

Work E-Mail _____ Home E-Mail_____

Home Street Address _____

City ___ State __De_____
Zip_19709_____

Home Telephone _____ Mobile _

I prefer to be contacted at (check all that apply): ❑Work ❑Home x❑Mobile

Why are you interested in joining the Board of the Parent Information Center of Delaware? Please explain.

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Skills and Experience

Please share with us any relevant employment; education and volunteer history that you might have: (you may attach a resume):

_____

_____

_____

_____

Do you have a child with a disability? If so, how old is the child and what is the disability? _____Yes; 17 learning disability _____

1. What are the three principal skills/expertise that you would bring to our Board?

❑ Administration/Management	❑ Fundraising	❑ Operations
❑ Communications	❑ Government	❑ Public Relations
❑ Consulting	❑ Human Resources	❑ Technology
❑ Education	❑ Legal	❑ Social Media
❑ Finance	❑ Marketing	❑ Other__some medical knowledge _____

2. In what industries or sectors have you gained your principal skills/expertise?

❑ Education	❑ Entertainment/Culture	❑ Military
❑ Accounting/Auditing	❑ Faith Based	❑ Non-profit
❑ Advertising/Marketing	❑ Government	❑ Publishing
❑ Banking/Finance	❑ Health Care	❑ Real Estate
❑ Computers/ Info. Systems	❑ Human/ Social Services	❑ Retail
❑ Consulting	❑ Legal/Law Enforcement	❑ Hospitality/Rstrnt
❑ Consumer Products	❑ Manufacturing	❑ Other _____

3. How much time could you devote each month to your board activities per month?

❑ Under 4 hours	❑ 9 - 12 hours	❑ 5 - 8 hours

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❑ 13 - 16 hours ❑ Over 16 hours

4. I am most interested in serving on the Parent Information Center of Delaware Board to help with working on the following topics.

❑ Education ❑ Fund Raising ❑ Practice and Programs
❑ Oversight ❑ Public Relations ❑ Service Growth
❑ Other:_____

Members of the Parent Information Center of Delaware Board of Directors are required to:

1. Commit to a 3-year term of appointment
2. Attend all Board meetings, occasional special Board meetings or other Board activities. Each Board meeting lasts an average of 2 hours. There is an additional 1-2 hours of prep work prior to each Board meeting reviewing minutes, agendas and materials.
3. Sign a confidentiality agreement and conflict of interest statement.
4. Attend any Department of Education trainings
5. Be committed to the success of Parent Information Center of Delaware

I have read the requirements listed above, and if appointed, agree to meet all expectations to the best of my abilities.

_____ _____
Signature Date

Please Print Name

Please complete all sections of this application and return to:

Attn: Mary Caroselli, Board President, Parent Information Center of Delaware
404 Larch Center
Wilmington, DE 19804
Tel: (302) 999-7394 E-mail: picofdel@picofdel.org or

Mary Andrews, Executive Director
Mandrews@picofdel.org