2022 BOARD AND SUB-COMMITTEE



MEMBER APPLICATION

_ast Name:	First Name:	Date of Hire:	
Home Address:		City:	State:
County:	ZIP:	Preferred Phone#:	
Please select how you wo	uld like to be involved:		
Board Member (CCF has	s up to 20 Board Member	rs each year) Yes No	
	erve for a minimum of 2 y CAPTRUST is required to	rears and maximum of 3 years o apply for the Board	
Non-Board Committee r	member (each Committee	e needs 3-6 members) Yes	No
No CAPTRUST ter	nure required to apply for	sub-committee membership	
If applicable, please select	t which committee(s) you	u are interested in:	
• Event Planning Yes	No		
• Financial Literacy Ye	s No		
• Fundraising (from withir	n CAPTRUST and externa	l sources) Yes No	
• Grants (including Charity	y of Choice, Employee Re	equests, crisis grants, and National	Grants) Yes No
 Organizing Service/Volu 	unteer Work Yes N	No	
Comments on your selecti	ions above if desired:		
• Are you available to star	t in January? Yes	No	
Referred by CCF Board	Member:	Other:	
 Are you currently involve 	ed with CCF or have you	been in the past? Yes No	

4208 Six Forks Road, Suite 1700, Raleigh, NC 27609 | captrustcommunityfoundation.org

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FRIOR VOLUNTEER EXPERIENCE	
List any current or past outside board positions	s, volunteer efforts, honors, offices held, etc.
	en involved in other organizations that could present a
ACKNOWLEDGEMENT	
I certify that the information provided is accura Board or Committee position.	te and that the submission of this form does not guarantee a
Name	 Date
NOTIC	Date

*Please return all applications to Phil D'Unger by Wednesday, December 1, 2021.

CAPTRUST Community Foundation is an equal opportunity non-profit foundation and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.

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