

Board Exposure Experience & Board Champion APPLICATION Fall 2021

Board / Committee			
Organization	Click here to enter text.		
Website	Click here to enter text.		
Location / Address	Click here to enter text.		
City, State, Zip	Click here to enter text.		
Type of Opportunity	<input type="checkbox"/> Board of Directors <input type="checkbox"/> Other Committee (describe): Click here to enter text.		
Board/Committee Chair (name)	Click here to enter text.	Email	Click here to enter text.
Organization Executive Director / CEO (name)	Click here to enter text.	Email	Click here to enter text.
Mission Statement: Please share your organization's mission statement in the space provided			
Click here to enter text.			
Please identify the domains of the work of this board/committee (<i>please check all that apply</i>):			
<input type="checkbox"/> Advocacy and policy <input type="checkbox"/> Arts <input type="checkbox"/> Anti-poverty <input type="checkbox"/> Behavior/Mental Health/substances misuse <input type="checkbox"/> Children, Youth and Families <input type="checkbox"/> Criminal/Juvenile Justice <input type="checkbox"/> Economic Development <input type="checkbox"/> Education <input type="checkbox"/> Elders/aging Issues <input type="checkbox"/> Environment <input type="checkbox"/> Health <input type="checkbox"/> Other (describe): _____			
Board Champion			
Position / Role on Board/Committee	Click here to enter text.		
First Name	Click here to enter text.	Last Name	Click here to enter text.
Preferred email	Click here to enter text.	Preferred Phone	Click here to enter text.
Employer	Click here to enter text.		
Job Title	Click here to enter text.		
Address	Click here to enter text.		
City	Click here to enter text.	ST	Click here to enter text.
		Zip	Click here to enter text.

EQUITY LEADERS FELLOWSHIP

<p>What is the anticipated time commitment for the Fellow's board exposure experience as a non-voting member with your organization for the 6 months duration?</p>	<p>____ hours per month</p>
<p>What is the frequency of your board/committee meetings?</p>	<p> <input type="checkbox"/> More than once per month <input type="checkbox"/> Monthly <input type="checkbox"/> Every other month <input type="checkbox"/> Quarterly </p>
<p>We would like our fellows to have a good exposure experience during their approximately 6 month connection with you. If your board only meets every 2 or 3 months, what other opportunities could be provided to assure a monthly experience?</p>	
<p></p>	
<p>When do your board/committee meetings take place?</p>	<p> <input type="checkbox"/> Weekday Mornings <input type="checkbox"/> Weekdays between 9-5 <input type="checkbox"/> Weekday evenings <input type="checkbox"/> Weekends </p>
<p>Please describe the board/committee exposure experience you can offer the Equity Leaders Fellow as a non-voting member.</p>	
<p></p>	
<p>Describe the board/committee's motivation and interest for taking on an Equity Leaders Fellow as a non-voting member for a board exposure experience.</p>	
<p></p>	

EQUITY LEADERS FELLOWSHIP

Describe the board/committee's readiness and ability to be an inclusive and welcoming experience for the Fellow.

Describe the orientation to your board/committee that the Fellow will receive.

Click here to enter text.

We recognize that organizations are in various stages of interest, awareness, learning and action about issues of equity, diversity and inclusion. Please respond to the following question to help us understand where you are on this journey:

How intentional has the board/committee been in raising and advancing issues of importance to communities of color and/or exploring their work with an equity lens?

Click here to enter text.

As the potential Board Champion, what else is important for us to know about you?

Click here to enter text.

Please confirm the following and then sign below:

Our board/committee is interested in participating in the Equity Leaders Fellowship and if there is a successful match commits to engaging with a Fellow for a 6 month non-voting board exposure experience to begin in November or December.

Agree / Yes

I commit to serve as a Board Champion which means I will spend approximately 1-2 hours per month (outside of board/committee meetings):

- preparing the Fellow for and debriefing after meetings
- explaining board processes (including during meetings, as needed)
- acting as a liaison between the board and fellow, and facilitating a welcoming environment
- reviewing any materials provided by the Equity Leaders Fellow to assist me in my role
- participate in brief periodic check-ins with the ELF Coordinator
- provide evaluation feedback to help improve the program

Agree / Yes

EQUITY LEADERS FELLOWSHIP

I will participate in the Equity Leaders Fellowship Board Champion orientation/pre-work (approximately 2-4 hours total) prior to the Fellow beginning his/her exposure experience

Agree / Yes

(You may type your name instead of signing if submitting electronically from a personal email account)

Signature: _____

Date: _____

Applications are accepted on a rolling basis.

A board champion orientation will be held via Zoom during the fall. We will make every effort to find mutually agreeable dates. The board champion is required to attend one of these orientations.

Please return completed form to equityleadersfellowshipnh@gmail.com

For questions, please contact Equity Leaders Fellowship by email at equityleadersfellowshipnh@gmail.com or phone at 603-244-7359.

Applications can also be mailed to: Southern NH AHEC, Attn: Equity Leaders Fellowship,
128 State Route 27, Raymond, NH 03077