## 

**Continuum of Care Board of Directors**

**Candidate Application**

Name, phone and email address of nominating representative (*note: you can self-nominate*):

*Click to enter text.*

Date:mm/dd/yyyyName: First MI Last

Applicant contact Information: (**please check box** for preferred method of phone & email contact)

|  |  |  |
| --- | --- | --- |
| Phone (office) |  |  |
| Phone (cell) |  |  |
| Email (office) |  |  |

1. Select type of Board seat: Designated Flexible (may select both)
2. In the table below, if the Applicant is applying for a Designated Seat, select which Board Seat(s), and if the Applicant is applying for a Flexible Seat, select which Sector(s) the Applicant represents:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Designated:** | | |  | **Flexible:** | |
| Person with Lived Experience as Currently or Formerly Homeless | |  |  | *Select what sector(s) you represent:* | |
| County Housing and Community  Development Services | |  | Affordable Housing Developer |  |
| Education |  |
| San Diego Workforce Partnership | |  |  | Health |  |
|  | Law Enforcement |  |
| Veterans Affairs | |  |  | Justice |  |
|  | |  |  | Business |  |
| Homeless Services Provider - East Region | |  |  | Funder |  |
|  |  | Faith Community |  |
| Homeless Services Provider - | North Inland |  |  | Homeless Advocate |  |
|  | Region |  |  | Technology/Communication |  |
|  | Other (please specify) |  |

1. Candidate Employer Information

Name of Organization:

Job Title:

Address:

Type of business or organization:

Primary service(s) and area/population served:

Please list boards and committees you serve on, or have served on (business, civic, community, fraternal, political, professional, recreational, religious and social).

Organization Role/Title Dates of Service

Do you currently serve on the CoC Board? ☐ Yes  No

Do you currently serve as a member of one of the CoC Board’s Committees? ☐ Yes ☐ No

If yes, please select which Committee:

|  |  |
| --- | --- |
|  | Governance Advisory Committee |
|  | Evaluation Advisory Committee |
|  | Veterans Consortium |
|  | Addressing Homelessness Among Black San Diegans Ad Hoc Committee |
|  | Health and Homelessness Ad Hoc Committee |
|  | Aging and Homelessness Ad Hoc Committee |

Do you currently serve on the RTFH Board of Directors? **\***  ☐ Yes  No

Do you currently serve on one of the RTFH Board of Director’s Committees? **\***  ☐ Yes  No

**Diversity:** The Board of Directors is committed to fostering a culture of diversity and inclusion and believes that board diversity is critical. We ask that prospective Board Member complete these **optional**demographic questions. **(Please check all that apply)**

Gender:  Male  Female ☐ Transgender ☐ Other: (enter here)

Race:  American Indian/Alaska Native ☐ Asian  Native Hawaiian or other Pacific Islander

☐ Black/African-American ☐ White/Caucasian ☐ Multi-Racial

☐ Other: (enter here)

Ethnicity:  Hispanic  Non-Hispanic

**\* For informational purposes only: this is not an application for the RTFH Board of Directors.**

3. Age: ☐ 18-24  25-54 ☐ 55-64 ☐ 65+

4. Are you currently experiencing homelessness, or have you in the past? ☐ Yes ☐ No

*If yes:* ☐ Current-5 years ago

☐ 6-10 years ago

☐ 11+ years ago

1. **Skills, experience and interests (Please check all that apply)**

|  |  |  |
| --- | --- | --- |
| ☐ Finance, accounting |  | ☐ Special events |
| ☐ Personnel, human resources | ☐ Grant writing / Fundraising |
| ☐ Administration, management | ☐ Outreach, advocacy |
| ☐ Nonprofit experience | ☐ Legal/Law |
| ☐ Community service | ☐ Homeless Provider (current-5 years ago) |
| ☐ Policy development | ☐ Homeless Provider (6-10 years ago) |
| ☐ Program evaluation | ☐ Homeless Provider (11+ years ago) |
| ☐ Public relations, communications | ☐ Other *(enter here)* |
| ☐ Education, instruction |  |

1. How do you feel the CoC would benefit from your involvement on the Board?

1. As a Board member, how would you engage other systems in the CoC to implement the actions outlined in the *Regional Community Action Plan to Prevent and End Homelessness in San Diego*?

1. Describe how you may be able to contribute to the economic, environmental and cultural diversity of the Board, and any groups or organizations you could serve as a liaison to on behalf of the Board.

1. If selected for the CoC Board, please identify up to one proxy who represents the stakeholder group of the seat for which you are applying. The proxy member can attend CoC Board meetings on your behalf, and vote on any action items that come before the CoC Board.

Proxy name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proxy e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proxy phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If not nominated to serve on the Board, please identify any one of the CoC Board’s Committees you may be interested in serving on:

|  |
| --- |
| Governance Advisory Committee |
| Evaluation Advisory Committee |
| Veterans Homelessness Committee |
| Evaluation Advisory Committee |
| Homeless Management Information System Sub-Committee |
| Rating & Ranking Sub-Committee  *note: any organization potentially receiving HUD funding is excluded from participation on this sub-committee* |
| Ad Hoc Committee Addressing Homelessness Among Black San Diegans |
| Ad Hoc Health and Homelessness |
| Ad Hoc Aging and Homelessness Ad Hoc Committee |
| Ad Hoc Youth Action Board |
| No, I am not interested in serving on a committee |

* **In submitting this application, you verify that you will follow the Board of Directors policies and procedures, to include signing the** [**CoC Board and Committee Commitment Form**](https://www.rtfhsd.org/wp-content/uploads/CoC-Board-and-Committee-Commitment-Form-update-Mar-2023.docx)
* **Members of the CoC Board of Directors must commit in writing to attend a minimum of 50 percent of Board meetings to be considered in good standing.**

Thank you very much for applying.