

OEFFA Board of Trustees Application Form

Thank you for your interest in joining the OEFFA Board! Please complete this form, which will be reviewed by the Board Nomination Committee and summarized for the current Board. Please make sure to let us know what questions you have for us.

Your name: _____

Preferred Phone Contact Number: _____ Is this a ___ Cell? ___ Home?

Your mailing address: _____

Your email address: _____

1. Briefly describe why you would like to join our Board of Trustees:

2. Your current organizational (both professional and volunteer) affiliations (names of the organization and your role(s):

a. _____

b. _____

c. _____

d. _____

3. Which of your skills would you like to utilize on the Board? Check those that apply:

Board development

Financial management

Training

Strategic planning

Fundraising

Marketing

Staffing / HR

Program Evaluation

Volunteer management

Program development

Community networking

Facilities management

Legal

Project management

4. What other skill(s) would you like to utilize?

5. What do you believe OEFFA's priorities should be in the next 3-5 years?

6. Do you farm? Yes No Retired from farming

If yes or retired, please describe your farming operations (what you produced, your production methods):

7. What would you like to get out of your participation on the Board, eg, what types of experiences, skills, or interests would you like to have or develop?

8. OEFFA Board members who do not have a financial or management interest in an OEFFA-certified entity also serve on the OEFFA Certification Board.

Do you have an interest in an OEFFA-Certified entity? Yes No

9. If you join the Board, you agree that you can provide at least 6 hours a month to attend Board and Committee meetings, respond to OEFFA-related emails or calls, and participate in OEFFA events.

Yes No

10. Is your membership in OEFFA current? *Only OEFFA members are eligible to serve on the Board.*

Yes No

Note that information on this application will also be used to draft a brief biographical sketch of you as a nominee to the Board, to be published in OEFFA's newsletter and presented to OEFFA members as part of the election process. Your signature signifies consent.

Your signature: _____ Date: _____

Please return this application via email to boardapplication@oeffa.org or mail to OEFFA, 41 Croswell Rd., Columbus, OH 43214

Please list any questions for us here: