



BITV BOARD/COMMITTEE MEMBER CANDIDATE QUESTIONNAIRE

This questionnaire will be considered personal and confidential by BITV and its Board of Directors.

Name: _____ Home phone: _____

Home address: _____

Bus. phone: _____ Cell phone: _____ email: _____

Business name: _____

Business address: _____

Preferred contact method: _____ BITV Contact: _____

Briefly tell us what you know about BITV.

What do you consider to be BITV's strengths?

What do you consider to be BITV's weaknesses?

What is the single most important item BITV should be doing?

Where would you like to see BITV in 3 years?

How do you believe you can best contribute to BITV's success?

Why are you interested in becoming a Board or committee member at BITV?

Meeting and volunteer availability:

Weekdays: _____ Evenings: _____ Weekends: _____

Availability details: _____



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What would you consider to be the most important roles of a Non Profit Board member?

- 1 _____
- 2 _____
- 3 _____

BITV has a small staff. What would you consider to be the most important responsibilities of the staff?

- 1 _____
- 2 _____
- 3 _____

To succeed, BITV needs financial assistance.

Can you make a financial contribution to BITV? _____

Can you ask for a financial contribution to BITV? _____

How else can you contribute to BITV's financial health?

How else can you provide resources that allow BITV to fulfill its mission?

Fundraising Experience:

Organization/Event	Your role	Dollars raised (if permissible)
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

Board Experience:

Company/Organization	Key contribution/Achievement	CEO or Chair
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

Committee Experience - Board or other:

Organization	Key contribution/Achievement	Committee Chair
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

Highest level of education completed

School: _____ Degree or Major: _____

Personal or professional references:

Signature _____

Date _____