Prospective Committee Member Application

Miss Kentucky Scholarship Organization

[www.misskentucky.org](http://www.misskentucky.org)

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Candidate Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Current Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Relevant Experience and/or Employment: **Please attach resume.**

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1. Please circle area(s) of expertise/contribution you feel you can make to further the mission of the Miss Kentucky Scholarship Organization:

Outreach/Public Relations Nonprofit Experience

Event Planning Community Service

Fundraising Program Evaluation

Social Media/Communications Strategic Planning

Graphic Design/Technology Grant Writing

Finance/Accounting Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please list Boards and Committees that you currently serve or, or have served on (business, civic, community service, political, professional, recreational, religious, and social).

Organization Role/Title Dates of Service

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1. What other volunteer commitments do you currently have?

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1. Why are you interested in serving as a Committee member for the Miss Kentucky Scholarship Organization?

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1. How do you feel Miss Kentucky Scholarship Organization would benefit from your involvement on the Committee?

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1. Please list any groups, organizations, or businesses that you could serve as a liaison on behalf of the Miss Kentucky Scholarship Organization:

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1. Please share any other information you feel important for consideration of your application to serve as a Miss Kentucky Scholarship Organization Committee Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Please review and respond to the following questions. Use a separate sheet if necessary.
	1. Are you aware of any information about yourself, which might tend to reflect unfavorably on your reputation, morals, character, or ability to serve as a Committee member for the Miss Kentucky Scholarship Organization?

\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_ No (if yes and you would like to explain, use a separate sheet of paper)

* 1. Have you ever been convicted of a felony?

\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_ No (if yes and you would like to explain, use a separate sheet of paper)

* 1. Have you ever been convicted of a controlled substance offense?

\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_ No (if yes and you would like to explain, use a separate sheet of paper)

* 1. Have you ever been convicted of a sex-related crime?

\_\_\_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_ No (if yes and you would like to explain, use a separate sheet of paper)

1. Supplemental Questions:
	1. Are you willing and able to attend monthly Committee meetings? \_\_\_\_\_\_ Yes \_\_\_\_\_ No
	2. Are you willing to interact with contestants, parents, sponsors and other Board/Committee members with professionalism and respect? \_\_\_\_\_\_ Yes \_\_\_\_\_ No
	3. Are you willing to uphold the responsibilities assigned to you? \_\_\_\_\_\_ Yes \_\_\_\_\_ No

By signing below, I attest that the information I have provided is true and correct. Additionally, my signature represents my agreement to the Miss Kentucky Scholarship Organization Expectations; and I understand that if conflicts prevent me from performing the rules and expectations of a Committee Member, I may be removed from the Committee by a majority vote of the Board of Directors.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Board Use**

\_\_\_\_\_\_ Nominee has had a personal meeting with an existing Board Member. Who/Date? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_Nominee reviewed by the Executive Board. Date \_\_\_\_\_\_

\_\_\_\_\_\_Nominee proposed to the Board. Date\_\_\_\_\_\_

\_\_\_\_\_\_Board Action: Elected Rejected Date\_\_\_\_\_\_