

Board Membership Application

Please type or print clearly

PERSONAL INFORMATION		
Last Name	First Name	Middle
Employer/Affiliation		Title
Street Address		
City/State/Zip Code		
()	()	()
Phone	Fax	Mobile
Email Address:		
Are you a parent?	If yes, ages of Children	
Is your employer a private, for-p	rofit enterprise, a community	based non-profit organization
☐ Other (please	enecify):	
	specify):	
COMMUNITY/CIVIC INVOLVEMENT Please list up to five community, civic,	professional business and oth	er organizations of which you
are or have been a member.	professional, basiness, and san	or organizations of which you
Organization Name	Dates of Membership	Position(s) Held
		,
STATEMENT OF INTEREST (Use ac	ditional pages or cover letter	if needed)
Reasons for applying/additional comm		
11.7.6		

Federal and State law requires this Coalition to reflect representation of the local community by race, gender, ethnicity, and other characteristics.		
Race (check one):		
American Indian or Alaskan Native		
Sex: ☐ Male ☐ Female Are you age 55 or older? ☐ Yes ☐ No		
Are you a veteran?		
If you need accommodation, please specify:		
COMMITMENT AND ODERATIONAL STATEMENTS		
COMMITMENT AND OPERATIONAL STATEMENTS		
Time Commitment : Serving on the Early Learning Coalition of Hillsborough County will require a commitment of time including regular coalition meetings, committee involvement, reading and becoming educated about many aspects of early childhood development and school readiness.		
Employment : The school readiness legislation states that nominated members must be from the private sector, and neither they nor their families may earn an income from the early education or child care industry.		
Conflict of Interest : Conflict of interest may occur when an item is presented for a vote that will directly affect you, your employer, or another organization you are involved with. Conflict of interest rules generally require you to disclose the conflict and abstain from discussion or voting on the matter.		
Government in the Sunshine : The Early Learning Coalition of Hillsborough County is a legislatively mandated group and will operate following the rules and guidelines of "Government in the Sunshine".		
My signature below confirms my understanding of these requirements and my agreement for application for membership to the Early Learning Coalition of Hillsborough County.		
Applicant Signature Date		

SUBMISSION OF APPLICATION FORM & CONTACT FOR ADDITIONAL INFORMATION

Application forms may be completed in full and submitted to:

Dave McGerald, CEO
Early Learning Coalition of Hillsborough County
6800 N. Dale Mabry Highway, Suite 158
Tampa, FL 33614
Email: dmcgerald@elchc.org
Website: www.elchc.org

Telephone: (813) 515-2340 Fax: (813) 435-2299