



Board Member Application

Name: _____

Email: _____

Mailing Address: _____

Phone: _____

Current Employer & Position:

Please describe your relevant experience (you may also attach a resume):

Please indicate your background:

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Education | <input type="checkbox"/> Healthcare/Mental Health |
| <input type="checkbox"/> Business | <input type="checkbox"/> Lived Experience |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Community ambassador |
| <input type="checkbox"/> Other | |

Please briefly outline the specific skills you bring, or contributions you hope to make, to this board:

Please list prior experience to serving as a board member for other non-profit organizations:

Why are you interested in serving as a board member for FailSafe for Life?

Please share any other information you feel important for consideration of your application to serve as a board member for FailSafe for Life:

Thank you for your interest in supporting suicide prevention!!