FRIENDS OF RECOVERY – NEW YORK

BOARD MEMBER INTEREST FORM

Friends of Recovery – New York (FOR-NY) is a 501 (c)3 non-profit organization with a mission to demonstrate the power and promise of recovery from addictions and its value to individuals, families and communities throughout New York State and the nation. We actively seek to advance public policies and practices that promote and support recovery.

FOR-NY is comprised of a small, dedicated staff managed by an Executive Director, and governed by a Board of Directors. Members of the Board of Directors must be 18 years of age, qualified, and duly elected by sitting members of the Board. Board Members are elected to a four (4) year term. They are volunteers and do not receive compensation. Board Members devote their time, energy, and expertise to help further FOR-NY's mission.

To be considered for a position on the Board, complete the information listed below, and email the form to info@FOR-NY.org. If an application meets the Board's criteria, the applicant may be asked to meet with the Board to be considered for nomination. Once a nomination is confirmed, policy and governance documents will be provided to the applicant. Applicants will be expected to sign a Conflict of Interest Statement upon appointment.

APPLICANT INFORMATION

NAME:	
IVAIVIE:	
ADDRESS:	
PHONE #:	
E-MAIL:	
Employer: (Name/Address)	
(Name/Address)	
Title:	

SUMMARY (Provide a brief summary of responsibilities:)

Connection to Recovery: (Please check all that apply)

Are you a person in recovery?
Are you a family member of a person in recovery?
Are you a friend of a person in recovery?
Are you an ally of recovery?

(Please provide a brief description of your connection to recovery. Are you a friend, family member or ally to recovery? Why you are interested in becoming a FOR-NY Board Member.)

Skills:

(Please provide a brief summary on how you feel you could be an asset to our organization. Include any skillsets that could prove helpful in this role.