

Please provide an overview of what you believe to be your most significant volunteer and leadership roles (with and/or outside of Emerge Broward): _____

Please list the name, title/business, email, and phone number of a professional reference who can support your application for Board Engagement: _____

I understand the expectations of participation in the Board Engagement program, and I am willing to fulfill all responsibilities as described. I confirm that I am a paid Emerge Broward member.

I agree.

Applicant's Name: _____ Date: _____

Applicant Signature: _____

The Board Engagement program is generously underwritten by the BBX Capital Foundation.



Email completed application form to info@emergebroward.org.