



Board Member Background & Network Form

Academia

High School: _____

Alumni Association Affiliation: Yes No

Undergraduate Institution: _____

Alumni Association Affiliation: Yes No

Graduate Institution: _____

Alumni Association Affiliation: Yes No

Civic Group Associations

(Please list any volunteer, recreational, social, and/or spiritual organizations that you are a member of.)

Business

Company/Employer: _____

Corporate Giving Program: Yes No

Network

Personal Contacts:

(Please list 2-3 individuals whom you are willing to reach out to and introduce to PAC.)

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Professional Contacts:

(Please list 3-5 individuals whom you are willing to reach out to and introduce to PAC.)

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Personal Volunteer Statement of Purpose

(Please share the reason(s) why you became involved with PAC.)
