**Association for Black Culture Centers**

**(ABCC)**

**Board of Directors**

**Application Form**

Name ( )

Institutional Affiliation

Campus Address

City State Zip+4 Code

Fax: E-mail Address

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Web Address: Yrs. @ Institution Yrs. Attended ABCC Conference

l. What would be the specific nature of your potential contribution to the Association for Black Culture Centers’ Board of Directors, given your experiential background and institutional resources?

2. Would you have time and resources to meet the minimal requirements of attending (2) Board meetings a year, one of which is at the ABCC national conference?

3. How would you best fulfill the ABCC Board requirements of serving on two committees each year? (Committee work is reported quarterly by each chair, and is a must to remain in good standing.) Among the committees listed below, please identify your first three preferences:

a. Membership e. Editorial/Publications

b. Strategic Planning f. Business/Finance (Grants)

c. Public Relations g. Institutional Benefits

d. Student Research and Development

(Use an attached sheet if necessary for your responses)

Date: Signature\_\_\_\_\_\_

(Board Application 2014/2015)