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## BOARD OF DIRECTORS APPLICATION FORM

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Thank you for your interest in serving as a member of the Board of Directors of Voices for Children of Tampa Bay (VFC). Serving on the board is a rewarding experience and an opportunity for personal and professional growth. Completing this form will help you understand the skills and time/resource commitments of this leadership position. You may find it helpful to read through the entire application and Board Member Responsibilities before you begin filling it out.

Please return the completed application to Voices for Children of Tampa Bay by email to [bgrossfi@gmail.com](mailto:bgrossfi@gmail.com).

This application will be kept confidential in the Voices for Children of Tampa Bay office. Applications are reviewed by the Board Recruitment Committee to identify and evaluate potential board candidates. All new directors are elected by a majority vote of current board members. Newly elected board members will begin serving January 1, 2026 (those joining after Jan 1<sup>st</sup> will also be considered as part of that class of board members).

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### BOARD MEMBER RESPONSIBILITIES

- Serve a minimum of one (1) three-year term on the Board. Eligible to serve an additional (1) three-year term if re-elected.
- Prepare for and attend at least eight (8) regular Board meetings (held monthly).
- Chair or serve on one VFC committee each year. Committees include: Finance, Board Recruitment, Development and Executive.
- Make Voices for Children your philanthropic priority. Participate in the advancement of VFC's mission through fundraising and donor/board recruitment.
  - Personally donate a minimum of \$350 to VFC by the end of the first quarter each year.
  - Support VFC's financial goals by raising or otherwise garnering support in the minimum amount of \$1,000, whether in the form of donations, sponsorships, or in-kind donations, in addition to the personal contribution listed above. (If you are unable to garner this support from your contacts, please know you are responsible for this amount per our bylaws.)
- Provide organizational oversight to ensure legal, financial, and ethical integrity.
- Act as an ambassador for the organizations mission and promote its work in the community to bring in new partners, volunteers, guardians, and board members.



## MISSION STATEMENT

We provide support and advocacy for abused, neglected, and abandoned children in the foster care system to ensure they have the resources and enrichment opportunities they need to feel safe, loved, and cared for.

## VISION STATEMENT

We envision a world where every foster child has hope for a brighter future.

## CANDIDATE INFORMATION

Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Number of Years with Present Company: \_\_\_\_\_

Number of Years Lived or Worked in/with Hillsborough County : \_\_\_\_\_

Briefly describe why you would like to join our Board of Directors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your current organizational affiliations (names of the organization and your role(s):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Which of your skills would you like to utilize on the Board? Check those that apply:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Board development   | <input type="checkbox"/> Financial management | <input type="checkbox"/> Training             |
| <input type="checkbox"/> Strategic planning  | <input type="checkbox"/> Fundraising          | <input type="checkbox"/> Marketing            |
| <input type="checkbox"/> Staffing / HR       | <input type="checkbox"/> Evaluation           | <input type="checkbox"/> Volunteer management |
| <input type="checkbox"/> Program development | <input type="checkbox"/> Community networking |   |

Other skill(s) of yours that you would like to utilize? \_\_\_\_\_

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What is your experience with the Guardian ad Litem Office and/or VFC?

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If selected, how do you feel you could contribute to the success of VFC?

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Are you willing to give time, energy and resources to support the mission of Voices for Children of Tampa Bay?

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Are you comfortable soliciting others for sponsorship and funding? \_\_\_\_\_ If yes, please describe any experience you have in doing so:

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What do you believe are the two most significant issues or problems facing the Guardian ad Litem Office and/or VFC?

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Were you referred by someone? If so, who? \_\_\_\_\_

Preferences: When we contact you to send information, confirm meetings, etc., how do you wish us to contact you:

1. Overall what is your preferred method of contact?  Email  Phone
2. If we need to send physical mail from this office, how would you prefer to receive it?  
 Home address  Business address
3. How would you prefer to receive emails?  Home email  Business email
4. When we telephone you to remind you of meetings, which phone would you prefer we use?  
 Home phone  Business phone  Cell phone

Please provide a brief biography and professional photo (if available):

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### Agreement and Signature

By submitting this application, I certify that the above and attached information to this application is true and accurate.

|                |  |
|----------------|--|
| Name (printed) |  |
| Signature      |  |
| Date           |  |

