



**APPLICATION FOR THE BOD**

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

(this is the name used at all meetings and for all documentation)

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

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

Telephone Number: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_/\_\_\_/\_\_\_

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

*Please familiarize yourself with our By-Laws and Standard Operating Procedure (SOP) Manual prior to the interview. The job description for the position you are applying for is listed in the SOP.*

**Have you ever been convicted of or plead guilty to a felony?    YES                      NO**

*If you answer yes, please include on a separate sheet of paper the circumstance. Each case will be taken into consideration by the board of directors.*

*If you answer NO and it is found out that you misrepresented yourself, you will automatically be removed from the position on the board of directors.*

What BOD position are you applying for: (Circle One)

- President                                      Vice President                                      Secretary                                      Treasurer
- Membership Chair                                      Member at Large                                      Parliament Rep

Briefly describe why you feel that you are qualified for this position:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please mail your application to:**  
**I.S.Q.C.C.B.E.**  
**P.O. Box 141152**  
**Cincinnati, OH 45250**  
**ATTN: Election Committee Chair**

Signature (Legal Name): \_\_\_\_\_

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

*The I.S.Q.C.C.B.E. will not discriminate against any person or persons on the basis of age, gender, gender- presentation, race, color, ethnicity, national origin, sexual orientation, religion, creed, marital status, or physical and/or mental disability in any of its activities or operations. The I.S.Q.C.C.B.E. will not tolerate any violation of this policy, and appropriate action will be taken, up to and including the removal of membership in the I.S.Q.C.C.B.E.*