

North Carolina Foundation for Nursing

Board of Trustees – Application

President-Elect • Secretary/Treasurer • Trustee

Please list your preferred position you would like to be considered for: _____

First Name: _____ Last Name: _____

Credentials: _____

Email: _____

Phone (Work • Home • Cell): _____

Company: _____

Title: _____

Please describe why you are interested in serving on the NCFN Board of Trustees.

Please describe your professional and community volunteer experience.

Please describe how your experience and skills would contribute to your service on and advance the work of the NCFN Board of Trustees.

Please use this space to provide any additional feedback that you would like to share.

Additional Request: Please provide a copy of your resume/CV as a separate document when submitting this application. Applications not including a resume/CV will not be considered.

Deadline: Please submit your application with all requested documents to RNs@nurses.org by 4:30 PM on Monday, 11/28/22.