



Board Member Recommendation Form

Date _____

I recommend _____ as a College of the Siskiyous Foundation Board Member.

Contact information

Address _____

Phone _____

E-mail _____

Check all that apply:

- Promotes the Foundation mission in the community
- Currently donates annually to the Foundation
- Ability to donate annually to the Foundation
- Established gift through a will, trust, insurance or other planned gift
- Can obtain cash contributions from individuals, groups, corporations, foundations or government programs.
- Has contacts for fundraising in the community
- Volunteers for the Foundation on
 - Fund Development Committee
 - Events Coordination
 - Investment & Finance Committee
 - Board Governance Committee
 - Scholarship Committee
 - Enterprise Operations Committee
- Has expertise needed by the Board in the area of _____
- Willing to serve a full four-year term and invest in the Foundation and its activities
- Can attend board meetings four times per year and a retreat one day a year
- Meets a stated need for diversity, career, or location.

Additional comments _____

Recommended by _____

Send to: College of the Siskiyous Foundation, 800 College Ave., Weed, CA 96094