

Application / Information Form For Position on Explorit's Board of Trustees

Name		Title:	Dr.	Mr.	Mrs.	Ms.
Spouse / Partner's name	Children					
Please complete this section and check your preferre	d mailing addre	ess and mod	les of co	mmunico	ation	
Home Address						
Cell phone						
Business Address						
Fax:						
Name / Title to be used for official correspondence						
Employer						
Administrative Assistant (if applicable)						
Educational Background						
Professional Experience						
Affiliations / Community Service (organizations, boards	s, etc.)					
Talents, hobbies, interests						
Countacts with any foundations, corporations, businesse						
Coollidats with any foundations, corporations, businesse	es, sei vice ciubs_					
I have read the Board Member's Agreement and am	interested in be	ing conside	red for a	a Board p	osition.	
Please check those committees that might interest you:						
ProgramFinanceFund Developmen	t/Campaign	Market	ing	Hı	ıman Res	ources
Corporate Science ChallengeFacilities	, ,		J			
Please attach two supplementary paragraphs as follo	ows:					
a. Please explain why you are interested in b		d for a positi	ion on E	xplorit's F	Board and	d
ways you would particularly like to help E	xplorit.					
b. Please write a brief description of yourself Staff.	f that could be u	sed to introd	duce you	to the Bo	oard and	the
Do we have permission to use the the information you've Put an X by any you would not wish to be made public		ublicity for E	xplorit?			_

Signature

Date signed