1819 L Street NW, 7th Floor

Washington, DC 20036

**COMMUNITY ADVISORY BOARD APPLICATION**

**Please submit your resume with your application to** [**cab.wpfw@mail.com**](mailto:cab.wpfw@mail.com)

Name

Address

City State Zip

Home Phone Mobile

Email

**How long have you been listening to WPFW? Why do you listen?**

**What are your favorite programs?**

**Have you ever volunteered with WPFW? If yes, in what capacity?**

**Do you volunteer with other nonprofit organizations? If so, which one?**

**Have you ever served on an advisory board or board of directors? Which one(s) and when? What was your role? What were your accomplishments?**

**What would you want to accomplish through your involvement on the CAB? What are your strengths and skills in this regard?**

**The CAB works with through 4 committees – Outreach, Programming, Fundraising, Bylaws & Membership. On which two committees do you prefer to serve and why?**

**How do you believe WPFW can be more involved in the community?**

**How do you think the CAB should help assess the community's wants and needs?**