



THE ARC OF NEW MEXICO BOARD OF DIRECTORS APPLICATION

APPLICANT INFORMATION

Name: _____
Last *First*

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Alternate Phone: _____ Email _____

Please check region of residence:

___ **Northeast Region:** Los Alamos, Santa Fe, Taos, San Miguel, Mora, Colfax,
Guadalupe, Union, Harding, Torrance, Rio Arriba;

___ **Southeast Region:** Lincoln, DeBaca, Roosevelt, Curry, Quay, Chaves, Lea, Eddy;

___ **Central Region:** Sandoval, Valencia, Bernalillo, Socorro;

___ **Southwest Region:** Catron, Grant, Sierra, Otero, Hidalgo, Luna, Dona Ana;

___ **Northwest Region:** San Juan, McKinley, Cibola

Board Diversity

The Arc is committed to building a Board of Directors that is representative of the diversity of the community we serve along dimensions of diversity which include, but are not limited to, the following: race, ethnicity, age, gender identity, sexual orientation, disability, education, religion/spirituality, country of origin, tribal community, language, socio-economic status, military service, urban/suburban and rural communities, and professional background.

In the space below, please provide any information you are willing and care to share that will help us understand whether and how your appointment will contribute to the diversity of the Board. Your response is entirely voluntary.

Board Interest: *Why are you interested in serving on The Arc of NM Board of Directors?*

EXPERIENCE, KNOWLEDGE, AND EXPERTISE: *Please identify your expertise areas .*

- | | |
|---|--|
| <input type="checkbox"/> Public Policy Advocacy | <input type="checkbox"/> Self-Advocacy |
| <input type="checkbox"/> Disability Advocacy | <input type="checkbox"/> Health Care/NM Waiver Systems |
| <input type="checkbox"/> Leadership Development | <input type="checkbox"/> Community Living for people with I/DD |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Social event/Conference planning |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Organization Membership Development |
| <input type="checkbox"/> Branding and Marketing | <input type="checkbox"/> Corporate or Nonprofit Law |
| <input type="checkbox"/> Investment Management | <input type="checkbox"/> Disability Law |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Social Media/Community Relations |

Other:

**DOES THE APPLICANT HAVE ANY EXPERIENCE OR IS AFFILIATED WITH THE ARC OF NEW MEXICO OR OTHER DISABILITY-CENTERED ORGANIZATIONS (i.e., PRO, SPECIAL OLYMPICS, DDS, CSA)?
IF SO, PLEASE SPECIFY.**

**DOES THE APPLICANT HAVE ANY EXPERIENCE BEING ON A NON-PROFIT BOARD OF DIRECTORS?
IF SO, PLEASE SPECIFY CURRENT OR PAST EXPERIENCE INCLUDING ORGANIZATION AND ROLE:**

Are you able and willing to attend quarterly meetings in Albuquerque? _____ Yes _____ No

***Mission** The Arc New Mexico promotes and protects the human rights of people with intellectual and developmental disabilities and actively supports their full inclusion and participation in the community throughout their lifetimes.*

Signature of Applicant

Date: _____

Printed Name

SUBMISSION REQUIREMENTS

To complete this nomination, send, email or fax the following four items:

1. The completed application form signed,
2. A current resume or curriculum vita

The Arc New Mexico
Attn: Board President
c/o Board Nominating Committee
5130 Masthead St. NE
Albuquerque, NM 87109

(Fax) (505) 883-5564
arcboard@arcnm.org
www.arcnm.org

**THE BOARD DEVELOPMENT COMMITTEE WILL REVIEW APPLICATIONS ON
A ROLLING BASIS**