

Board Member Biography

PERSONAL INFORMATION			
Name:			
Current address:		*SSN:	
		City:	State: ZIP Code:
Home Phone:		Cell Phone:	
Preferred Email:		Date of Birth:	Consumer: <input type="checkbox"/> Yes <input type="checkbox"/> No
Place of birth (State):		Country of Birth:	
Gender (Optional): <input type="checkbox"/> Male <input type="checkbox"/> Female	Preferred Language: _____	Race (Optional): <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native American <input type="checkbox"/> Other: _____	
Family Income Status (Optional): <input type="checkbox"/> \$0-\$50K <input type="checkbox"/> \$51K-\$100K <input type="checkbox"/> \$101K-\$150K <input type="checkbox"/> >\$150K		Other Protected Classes i.e. Veteran, Disability (Optional):	
<small>*Under Section 1128 & 1156 of the Social Security Act and 18 NYCRR 515.5 state that providers of Medicaid services may not employ or be affiliated with excluded persons and entities. The Centers for Medicare and Medicaid services specified that these provisions apply to all individuals with ownership or control interests in a provider entity, in particular Board of Director members and presidents. As such, for the agency to perform due diligence, we require the disclosure of your social security number which must match information on file at Social Security Administration.</small>			
EMPLOYMENT INFORMATION			
Current employer:			Title:
Employer address:			
Phone:			Fax:
City:	State:		ZIP Code:
Work Phone:	Work Fax:		
EDUCATION			
State Degree(s) and college(s) / university(ies) attended:			
BOARD MEMBERSHIPS AND OR COMMUNITY VOLUNTEER INVOLVEMENT (PAST & PRESENT)			
PERSONAL SUMMARY			
Summary Career Statement (limit 2-3 sentences only, include # of years in industry/field, and select awards or appointments).			
Areas of Expertise – check all that apply:			
<input type="checkbox"/>	Education	<input type="checkbox"/>	Fundraising
<input type="checkbox"/>	Financial Management	<input type="checkbox"/>	Legal
<input type="checkbox"/>	Public Relations/Marketing	<input type="checkbox"/>	Government
<input type="checkbox"/>	Philanthropic Community	<input type="checkbox"/>	Health or Behavioral Services
<input type="checkbox"/>	Volunteer Management	<input type="checkbox"/>	Business or Corporate
Other areas of interest and skills:			
Signature			Date