

Board Member Qualifications/Initial Questionnaire
(please check all that apply & explain)

Name: _____

- Knowledge of the challenges of persons with autism, their families/caretakers
- Heart to Support our Mission and Vision
- Human Resources _____
- Financial Accounting _____
- Communications/Marketing _____
- Social Media Management _____
- Fundraising/Funder Relations _____
- Design; graphic/web _____
- Business Development _____
- Legal Issues _____
- Past Board Experience _____
- Nonprofit Experience _____

Community Affiliations

- Professional Societies or Affiliations _____
- Community Nonprofits _____
- Elected Officials _____
- Relevant Funders _____
- Relevant Government Agencies _____
- Relevant Corporations _____
- Notes: _____

Life Experience

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Demographics

Gender: Male Female Other: _____

Age 20-29 30-39 40-50 Over 50

Race/Ethnicity: _____

On the Spectrum: Yes No