



Potential Board Nominee Profile

Thank you for expressing interest in joining the York Opioid Collaborative Board of Directors. The York Opioid Collaborative strives to build a board that provides the necessary skills to strategically grow the organization and work collectively to reduce overdoses and the impact of substance use on our community.

Organization Information

Mission Statement: To coordinate and create collaborations that raise awareness and advocate for support to collectively implement solutions and programs for substance use disorders.

Vision Statement: To significantly reduce the impact of substance use on the York County community and create an environment of continuous lifelong recovery and support.

Values Statement

- **Diversity:** We believe that our work should be informed by the perspectives and circumstances of the entire community.
- **Integrity:** We believe that everything we do should be informed by the most accurate research and have the best intentions.
- **Innovation:** We believe that the only way to stay current and be effective is to continuously advance our processes and knowledge.
- **Community:** We believe that we need to do everything possible to ensure we live in a healthy community.
- **Education:** We believe that continuous learning is the key to prevention and successful recovery.
- **Collaboration:** We believe that the work we do requires the help and support of many community partners.
- **Empathy:** We believe that we need to understand and appreciate where people are in their life journey and provide solutions that meet them there.

Section 1: Applicant Information

Name: _____

Preferred Name: _____

Employer: _____

Position/Title: _____

Phone Number: _____

Email Address: _____

Section 2: Candidate Profile

To assist the Governance Committee in putting forth the best nominees for the York Opioid Collaborative, please briefly answer each question and note which area(s) under each demographic and skill category best represents you.

1. Why do you want to join the York Opioid Collaborative Board?
2. Why are you passionate about our mission?
3. Board members are **required** to join at least one committee and attend bi-monthly board of director meetings on the 2nd Monday of the month at 3:00 p.m. How much time can you give us, and are there any professional or personal constraints on your time or service that you anticipate?
4. What motivates you as a volunteer?
5. What expectations do you have from the management of organizations on whose boards you serve?
6. Board members are required to make a financial contribution to the organization annually. Are you willing to make a financial commitment that is personally meaningful?
7. As you think about the three primary board roles – Ambassador, Advocate, and Asker – in which role(s) do you think you would be most active and why?
8. Are you currently a member of the Board of Directors of other organizations?
9. Please list any board service experience, including leadership positions held.

Experience <i>select as many as apply</i>	
Corporate	
Education	
Faith-based organizations	
Government	
Healthcare systems	
Legal	
Lived experience	
Marketing / public relations	
Small business	
Social services	
SUD treatment/intervention/prevention	
Other (please list):	
Personal Style <i>select the top 3 that best apply</i>	
Bridge builder	
Catalyst for change	
Consensus builder	
Good communicator	
Implementer (gets things done)	
Mediator	
Strategist (asks great questions)	
Visionary	
Expertise & Skills <i>select all that apply</i>	
Advocacy/policy	
Business analysis/planning	
Communications	
Financial management/accounting	
Fundraising	
Governance (board leadership/operations)	
Grant writing	
Human resources	
Legal	
Marketing/public relations	
Organizational management	
Strategic planning	
Technology	
Other (please list):	

Resources	
Capacity and inclination to give	
Access to funders and/or donors	
Available for active participation	
Age	
Under 18	
19-34	
35-50	
51-65	
Over 65	
Gender	
Male	
Female	
Non-binary	
Prefer not to answer	
Sexual Orientation	
<i>Do you identify as a member of the lesbian, gay, bisexual, transgender or LGBTQ+ community?</i>	
No	
Yes	
Prefer not to answer	
Race/Ethnicity <i>select all that apply</i>	
African American or Black	
Asian	
Caucasian or White	
Hispanic or Latino	
Native American or American Indian	
Native Hawaiian or Pacific Islander	
Some Other Race (please list):	

**Leave blank if you prefer not to answer.*

Section 3: Additional Information

1. Please describe components of diversity that apply to you which are not covered by the questions above.
2. Is there anything additional you would like to share with the York Opioid Collaborative about your experience, skill set, and/or ability to serve as a board member?
3. Which committees are you interested in serving on?
 - Finance Committee
 - Governance Committee
 - Fundraising Committee
 - Personnel Committee
4. Do you have any questions for the York Opioid Collaborative Governance Committee?

I HAVE READ AND UNDERSTAND THE BOARD ROLES & RESPONSIBILITIES, THE TIME AND FINANCIAL COMMITMENT INVOLVED, AND WHAT WILL BE EXPECTED OF ME. I, AS WELL AS MY EMPLOYER, AM AWARE OF THE ATTENDANCE POLICY. IN ADDITION, I VERIFY THE ABOVE INFORMATION REGARD TO MY DEMOGRAPHICS AND QUALIFICATIONS IS TRUE AND CORRECT.

Printed Name

Signature

Date