



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?**

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**What are your favorite programs?**

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

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

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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?

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

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

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

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

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