

Brain Injury Alliance of Idaho

The Mission of the Brain Injury Alliance of Idaho is to promote awareness, understanding and prevention of brain injury through support, advocacy and education based on the expressed needs of persons affected by brain injury.

The Application/Selection Committee will review applications from individuals interested in being on the Board of Directors. They will make recommendations to the Board at a regular meeting when necessary.

Board of Directors Job Description

The Brain Injury Alliance of Idaho Board of Directors is the governing body of the organization. The Board is responsible for setting overall direction, making policy decisions, establishing long range plans, ensuring that adequate financial resources are secured to carry out the work of the nonprofit organization, and providing continued enthusiastic and hardworking volunteer leadership.

Duties:

- Board members participate in 6 meetings per calendar year: 4 are telephone conference call meetings, usually scheduled the 3rd Thursday in the months of January, March, July, and November and 2 face-to-face meetings, usually scheduled on a Saturday in the months of May and September.
- Board members serve a 3-year term. Terms may be renewed by a favorable vote of the Board of Directors.
- If a Board member misses more than 2 meetings per year, he or she may be asked to resign with a majority vote of Board members.
- Each Board member should serve on at least one standing committee.
- Board members represent the organization in the community when appropriate and assist the organization to gain needed community support by exercising personal and professional contacts whenever possible.
- Board members should accept leadership positions on the Board as appropriate.

Qualifications:

Members must be a resident of the State of Idaho. Members should have an interest in the programs and goals of BIAID and in brain injury issues in general. Experience with brain injuries or knowledge in any of the following areas would also be beneficial: business, finance, medical, rehabilitation, military/veterans, law, technology, public relations, or fund raising.

Complete the following application form and submit to:

Kathy Smith

Brain Injury Alliance of Idaho

P. O. Box 414

Boise, ID 83701-0414

Or email your completed application form to: info@biaid.org

You will be contacted by a member of the Application Committee.

**APPLICATION FOR BOARD OF DIRECTORS
THE BRAIN INJURY ALLIANCE OF IDAHO**

Name: _____ Phone: _____

Address: _____ Email: _____

Relevant Experience and/or Employment (attach a resume if relevant) _____

Why are you interested in our organization? _____

Area(s) of expertise/contribution you feel you can make _____

Other information you want to share _____

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For Board Use

___ Nominee reviewed and contacted by the Application Committee. Date _____

Action taken by the board _____