

## OTSE PROSPECTIVE OTSE BOARD MEMBER APPLICATION

Thank you for your interest in becoming a member of the Board of Directors of Ohioans to Stop Executions (OTSE). We are a non-partisan statewide grassroots organization of individuals and groups united to end the death penalty in our state. At all times we prioritize protecting the humanity of persons impacted by the death penalty and the criminal justice system, and contributing to the national momentum to end capital punishment. This application will help us choose Board members who can further our mission. Applicants interested in serving as a board member should read and understand the General Roles and Responsibilities of OTSE Board Members.

1. Candidate Name \_\_\_\_\_  
First Middle Last

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Secondary: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Position: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Work Phone (if not provided above): \_\_\_\_\_

2. Racial/Ethnic Background:

From time-to-time OTSE is required to provide demographic information on our board as a whole. By sharing this information you will help ensure we are providing accurate data.

\_\_\_\_\_

3. Please mark area(s) of expertise/contribution you feel you can make to further the mission of OTSE:

- Administration/management
- Finance/accounting
- Fundraising
- Government
- Grant writing
- Law or other relevant academic experience
- Leadership skills/motivator
- Marketing/Public relations
- Policy development
- Social media/Communications

- \_\_\_\_\_ Organizing
- \_\_\_\_\_ Strategic planning
- \_\_\_\_\_ Personally impacted by capital punishment or the criminal justice system
- \_\_\_\_\_ Law enforcement or Corrections experience
- \_\_\_\_\_ Other: Please list: \_\_\_\_\_

4. Are you a family member of someone who has been murdered? Yes \_\_\_\_\_ No \_\_\_\_\_

5. Are you a family member of someone who is facing or has faced the death penalty?  
Yes \_\_\_\_\_ No \_\_\_\_\_

**In lieu of answering QUESTIONS 6 & 7, you may attach a resume. Note: if appointed to serve on the board you will be asked to provide a bio and a headshot.**

6. Please list boards and committees that you serve or have served on (business, civic, community, fraternal, political, professional, recreational, religious and/or social):

Organization Role/Title Dates of Service

7. What other volunteer commitments do you currently have?

8. Supplemental Questions:

a. Are you willing and able to attend regular board meetings, normally scheduled during evening hours, every other month? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Are you willing to serve on at least one committee? Yes \_\_\_\_\_ No \_\_\_\_\_

c. Are you willing to perform the responsibilities assigned to you? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**FOR NOMINATING/GOVERNANCE COMMITTEE USE ONLY**

Name of Applicant: \_\_\_\_\_

Nominee had a personal meeting with an existing Committee Member.

Board Member: \_\_\_\_\_ Date: \_\_\_\_\_

Nominee reviewed by the committee. Date: \_\_\_\_\_

Nominee proposed to the Board. Date: \_\_\_\_\_

Board Action: Date: \_\_\_\_\_

Elected \_\_\_ Saved for Future Consideration \_\_\_ Rejected \_\_\_

Completed Board Orientation - Date: \_\_\_\_\_