

APPLICATION FOR APPOINTMENT TO THE BOARD OF DIRECTORS

Please check the appropriate box: Greystone Programs, Inc. Greystone Endowment, Inc.

Name: _____ Home Phone: _____
Occupation: _____ Business Phone: _____
Address: _____
E-mail: _____ Do you check your e-mail regularly? _____

YOUR BACKGROUND: (Please use reverse side for any additional comments.)

A. What education or skills could you contribute to our Board? (Please check)

<input type="checkbox"/> Accounting	<input type="checkbox"/> Management	<input type="checkbox"/> Public Relations
<input type="checkbox"/> Investment	<input type="checkbox"/> Marketing	<input type="checkbox"/> Knowledge of Services
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Education	<input type="checkbox"/> Public Speaking
<input type="checkbox"/> Community Relations	<input type="checkbox"/> Planning	<input type="checkbox"/> Team Player
<input type="checkbox"/> Motivation	<input type="checkbox"/> Lobbying	
<input type="checkbox"/> Other (Please explain) _____		

Affiliations: _____

B. On what other boards have you served? _____

C. Were you able to attend on a regular basis? _____

D. Charitable or community activities in which you have been involved: _____

YOUR AVAILABILITY TO SERVE (Please use reverse side for any additional comments.)

- Could you attend monthly board meetings?
Yes _____ No _____ Conflicts: _____
- Could you participate in additional committee work?
Yes _____ No _____ Conflicts: _____
- How many hours per month, in addition to board meetings, could you serve this organization? _____
- Would you attend a training session for new board members? Yes _____ No _____
- Could you contribute to the annual Greystone Endowment campaign? _____

YOUR VIEWS ON OUR ORGANIZATION (Please use reverse side for additional comments.)

- What is your interest in this organization?

- Please write a brief statement of your understanding of the mission and vision of this organization (see reverse side).

REFERENCES (List names, addresses, and phone numbers)

SIGNATURE: _____ **DATE:** _____

Mission Statement

*Adopted by Board of Directors
October 13, 2005*

Committed to providing exceptional services and life enriching opportunities for children, adults, and families living with Autism and other developmental disabilities

Vision Statement

*Adopted by Board of Directors
May 11, 2006*

COMMUNITY LEADERSHIP: Greystone will become a leader in the field of advocacy and services for people and families living with autism and other developmental disabilities through improved cooperation and partnerships

DIVERSIFICATION OF SERVICE: Greystone will broaden service delivery by increasing diversification of opportunities for individuals and families living with autism and other developmental disabilities.

STABLE & EDUCATED WORKFORCE: Greystone will recruit, retain and develop a skilled, committed and caring workforce empowered to serve as advocate, teacher, role model and decision maker. We will provide exceptional training and continuing education, competitive pay and benefits, and opportunities for advancement. We share a commitment to excellence.

FINANCIAL STABILITY & INDEPENDENCE: Greystone will proactively seek new opportunities and create innovative programs through the exploration of new and diverse funding sources, increased fundraising revenues, and continued improvement of the business decision making process.

SUFFICIENT INFRASTRUCTURE TO SUPPORT GOALS: Greystone will optimize the agency infrastructure through continually evaluating and enhancing systems, facilities and technology to effectively support organizational goals.