



Thank you for your interest in serving on the Niskayuna Co-op Board of Directors. We look forward to reviewing your nomination materials.

**There is currently no deadline for nomination materials, but we would certainly like to receive and review your information as soon as possible.**

Please electronically submit the required information delineated below for consideration to [niskayunacoopboard@gmail.com](mailto:niskayunacoopboard@gmail.com) or submit to our General Manager Shannon Risley or Front End Manager Mary Ann at the store.

- The attached application form.
- A cover letter of interest. Please include how you feel your skills and experience would benefit the Co-op. In addition, please highlight your involvement in the community.
- Your resume (in lieu of a resume, please describe your recent work or volunteer history).

**Please be aware of the following requirements, guidelines, and information about Board service:**

- Board members must be Co-op members and cannot be employees or the spouses of or members of the same household as an employee, and must not have any conflict of interest with the Co-op.
- Board members volunteer their services and do not receive compensation.
- Board members are elected at the annual membership meeting for a three-year term.
- Board members are expected to attend monthly Board meetings that are typically scheduled for the fourth Wednesday or Thursday of each month at approximately 6 p.m.
- Board members are expected to dedicate time to their board responsibilities, including attendance at Board meetings and committee work. Support of ad hoc projects and participation in Co-op events require the commitment of additional time.
- Board members must serve on at least one Board committee/subcommittee.

If you have any questions about the roles and responsibilities of a member of the Co-op Board of Directors or the nomination process, please contact the Nominating Committee at [niskayunacoopboard@gmail.com](mailto:niskayunacoopboard@gmail.com).

(more)



**APPLICATION FOR NISKAYUNA CO-OP BOARD MEMBERSHIP**

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

REFERENCES (2): PLEASE INCLUDE ONE PROFESSIONAL AND ONE COMMUNITY REFERENCE, THEIR CONTACT INFORMATION, AND HOW YOU KNOW THEM.

REFERENCE \_\_\_\_\_

\_\_\_\_\_

REFERENCE \_\_\_\_\_

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PLEASE TELL US HOW YOU LEARNED ABOUT THIS APPLICATION OPPORTUNITY:

- Newspaper ad
- Co-op website
- Poster in store
- Word of mouth
- Referred by an existing or former Board Member. If so, who?

\_\_\_\_\_

Other \_\_\_\_\_