Board Roster

Applicants must complete the following Certification of Board Status and submit it along with their application for CHDO certification. Please list each board member by name, then place an "X" indicating the representation that member brings to the Board.

Please list only current or approved board members. Do not list prospective board members who have not been approved to join the board.

USE ADDITIONAL PAGES AS NECESSARY

Board Member's name and residential address (City, State Zip Code)	Affiliation(s)				Number of months as a Board Member	Board Member's occupation and place of employment	Board Member's areas of expertise or experience
	Low Income Community	Public Institution	Religious Organization	For Profit Organization			

Under penalty of perjury, I certify, to the best of my knowledge, which the information presented in this Certification is true and accurate. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination this application and funding.

BOARD PRESIDENT SIGNATURE _____ **DATE** _____