



Friends of the Colorado Talking Book Library

180 Sheridan Blvd., Denver, CO 80226

New Board Member Application

NAME _____

ADDRESS _____

City, State Zip _____

Phone _____ E-Mail _____

Current Employer _____

Title / Position _____

Work Phone _____

Braille Reader: Yes _____ No _____

Leadership Experience:

Applicant Name: _____ page 2

Advocacy Experience:

Fundraising Experience

Experience working with disabled or aging populations

List other experiences and skills you believe are relevant to your application.

Are you currently, or have you been, a CTBL patron, family member of a patron or a volunteer? _____

Explain your interest in serving on the Friends Board.

Please send your completed application by mail to: President, FOCTBL, 180 Sheridan Blvd., Denver, CO 80226, or by email to: President, FOCTBL, steffen_n@cde.state.co.us.

Thank you for your interest and application.