**(SAMPLE REQUEST FOR BOARD MEMBER RECOMMENDATIONS LETTER)**

To: Current Board Members

From: (NAME OF NOMINATING COMMITTEE CHAIR or BOARD CHAIR)

Date: (ENTER DATE)

Re: Board Member Recommendations

We are presently accepting nominations for interested, committed individuals to join the Board of Directors of NAME OF CAC for a three-year term beginning (ENTER BOARD YEAR START DATE).

To continue our efforts to maintain a productive and progressive Board for our Children’s Advocacy Center, we need recommendations of potential Board members who possess the leadership skills needed to assist the organization in its future growth and development.

All Board Members are strongly encouraged to analyze and review your associates, colleagues, and acquaintances to submit names for possible consideration. We are currently seeking community board members with the following expertise/experience:

Corporate/Business Law Risk Management

Marketing/Public Relations Technology

Accounting/Financial

We are striving to find board members who have local or regional Board experience. In addition, we seek to expand the Board to more accurately reflect the ethnic, racial, geographic, and generational diversity of ENTER NAME OF COUNTY OR COUNTIES SERVED.

Attached please find a Board Recommendation Form to be used for the purpose of recommending individuals who might be further explored/considered for nomination to the Board. If you would like the Nominating Committee to consider one or more individuals as possible Nominees, please complete the attached form and submit it along with a letter of recommendation, to the NAME OF INDIVIDUAL/COMMITTEE OVERSEEING NOINATION PROCESS on or before ENTER DEADLINE DATE.

Here are some suggestions for identifying appropriate candidates for the representative positions:

1. The CAC Board meets on a monthly/quarterly basis and committee work involves additional meetings throughout the year. Attendance at the monthly/quarterly meetings and committee meetings and/or conference calls is extremely important. Be sure the individual you recommend is available to consistently participate at this level.
2. The Board oversees the fiscal administration and operation of the CAC and its Executive Director. Board members will need to assist with fundraising endeavors and each member is asked to make a personal contribution as well.
3. Previous experience with other non-profit boards and organizations (non-profit and/or child serving organizations in particular) would be deemed a valuable asset in a candidate.

Also, you need not contact the individual you are recommending for consideration at this time. Should the Nominating/Development Committee opt to pursue your recommendation, we will contact you first to assist with making a connection with the individual you have recommended.

All recommendations must include a personal letter of recommendation from the individual submitting the name for consideration. While this letter need not be formal or lengthy, we ask that you include as much pertinent information as possible regarding why you believe this individual would be an asset to the state board. This information will also be helpful in determining where and how that individual might best be assigned (i.e. committees, projects, etc.) to make the best use of their strengths and talents.

If you have any questions or need more information in this regard, please feel free to contact me at ENTER PHONE NUMBER OF COMMITTEE OR BOARD CHAIR. Thank you for taking the time to participate in this process. We look forward to receiving your recommendations between now and ENTER DEADLINE DATE.

**NAME OF CAC**

# Fiscal Year 20XX Board Member Recommendation Form

Name of individual: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Profession: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What knowledge of, experience with, or relationship to the Child Advocacy Center and/or Multidisciplinary Team, if any, has this individual had?

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What, if any, other board, non-profit organization, and/or civic experience does candidate possess?

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Which of the CAC’s **Key Recruiting Criteria** for the coming year does this candidate fulfill and how?

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Name of individual making recommendation:

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Please return the completed form along with a letter of recommendation (and resume if available) to:

FILL IN APPROPRIATE CONTACT INFORMATION

By Date: ENTER DEADLINE