

For information on serving on a regional partnership council, please refer to the regional council member job description and the *Regional Council Member Application Guide*.

Please remember to save a copy of your completed application for your records.

Items marked with an asterik (*) are required.

Personal Information

Name*

First

Last

Home Address*

Address

Address 2

City

State

Zip + 4

Telephone Numbers*

Please enter at least one telephone number.

Home (include area code)

Office (include area code)

Mobile (include area code)

E-mail Address*

Please enter only one email.

Check here if you do not have an email.

Employment and/or Volunteer History

Resume* Attach a resume/vitae listing all positions held, a brief description of duties and accomplishments with your submitted application.

If you are currently employed, please complete the following section.

Current Position/Title*

Current Employer

Company Address

City

State

Zip + 4

Please list the main responsibilities of your current position.

Eligibility

Please list the regional partnership council(s) you are applying to serve on.

Regional Partnership Council(s):

_____ Eligible based on Home Address Work Address

_____ Eligible based on Home Address Work Address

If you feel you may be eligible for regional councils outside of your work or home address:

Please enter the additional Regional Partnership Council and zip code you are applying for and provide a justification for your selection. Justifications may be subject to approval prior to appointment. Attach additional sheet if necessary.

_____ Regional Partnership Council

_____ Justification

Experience/Expertise

Do you have experience serving on a board, council, advisory group, volunteer board, or commission?*

Yes No

If yes, please name the board(s) or council(s) and dates served. Add as many as needed.

Name of Organization

Dates of service:

Beginning (Month/Year)

End (Month/Year)

Describe any additional skills you would bring to the Regional Partnership Council.

Representation

Check any of the following that apply. While examples are defined, individual applicants may qualify based on experience or a description not specifically included but that is consistent with the community norms.

You must select at least one category.

- Parent of a child age five years or younger.** An individual who is a parent of a child five years or younger, at the time of appointment to the Regional Council, which may include a guardian who is the primary caretaker of a child five years or younger.
- Child care provider.** An individual who is: a child care, early education, or preschool provider, from a program licensed by the Arizona Department of Health Services, certified by the Arizona Department of Economic Security, authorized by a Tribal government, the U.S. Department of Defense, or registered with Child Care Resource and Referral.
- Health services provider.** An individual serving children five years and under. May include, but not limited to: physicians, nurses, County Health Department lay health care workers, school nurses, dentists, dental hygienists, registered dietitians, physical therapists, occupational therapists, speech therapists, psychologists, or other physical and mental health services paraprofessionals.
- Public school administrator.** An individual with administrative responsibilities in public schools, public charter schools, mission schools, or federal/Bureau of Indian Education schools on tribal lands.
- Early childhood educator/instructor.** Individual who provides early childhood professional development instruction. Includes, but is not limited to: community college and university level instructors or administrators and educators in other professional development organizations.
- Member of the business community.** An owner, officer, CEO, or member of the executive management staff of a for-profit or not-for-profit business.
- Representative of the faith community.** An individual with a voluntary or paid role within the faith community, a Traditionalist in a Tribal community, or other representation consistent with the community norms and titles.
- Representative of a philanthropic organization.** A member of the Board of Directors or executive management staff of a philanthropic organization.
- Tribal public official/employee.** A public official or employee of a Tribal government. (This applies if a tribe is located in a region.)
- At Large representative.**

Please provide a brief statement about why you are Interested in serving on a Regional Partnership Council. Please explain your interest in early childhood development and health, your vision for Arizona’s children, and your view of the need for community collaboration.

Multiple horizontal lines for writing a statement.

Are you currently serving, or have you served in the past, on a First Things First Regional Partnership Council? Yes No If Yes, please List the Regional Council and your representation category:

Two horizontal lines for listing the Regional Partnership Council and Membership Category.

Assurances*

By checking the boxes below, you are confirming that you understand the required conditions to serve on a Regional Partnership Council. You must check all boxes in order to submit your application.

- Assurances list with checkboxes: I live or work in the Region, I have time available to fulfill this commitment, I understand that this is an unpaid position, but I will be reimbursed for travel expenses, as requested, I understand that each Regional Council Membership is a four year term of service, and I understand I will need to complete the Arizona Department of Administration requirements for Board and Commission volunteerism, including Conflict of Interest training, Open Meeting Law training and public service ethics training. I further understand I will need to complete documentation including a W-4 Federal Tax Withholding Form, A4-Arizona State Tax Withholding form, and a 1-9 Income Eligibility Form.

Two horizontal lines for Signature and Date.

Thank you for your interest and your application.

Applications can be returned to a local office, or to the First Things First office at: 4000 North Central Avenue, Ste 500, Phoenix, Arizona 85012 - Attn: Regional Division For questions, please call 602.771.5065 or email serve@firstthingsfirst.org