

AUTISM FOR LIFE FOUNDATION

LEVEL OF EDUCATION:

(Please mention the highest level of education completed or any relevant certifications.)

OTHER PROFESSIONAL AFFILIATIONS:

(List any organizations, societies, or groups you are currently affiliated with or have been associated with in the past.)

OTHER BOARD SERVICES:

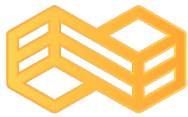
(Have you served on any other boards? If yes, please list the organizations and the role you held.)

EXPECTED LEVEL OF GIFT OR POSSIBLE IN-KIND DONATIONS:

(Please indicate the expected level of financial contribution or in-kind donations you would be willing to make annually as a board member.)

SPECIAL INTERESTS OR HOBBIES:

(Tell us about your passions outside of work, any hobbies, or special interests you have.)



AUTISM FOR LIFE FOUNDATION

WHY EXACTLY DO YOU WANT TO BE ON THE BOARD OF AUTISM FOR LIFE FOUNDATION?
DO YOU HAVE A CONNECTION WITH AUTISM AN/OR NEURODIVERSITY

DECLARATION:

BY SUBMITTING THIS APPLICATION, I CONFIRM THAT THE INFORMATION PROVIDED ABOVE IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY MISREPRESENTATION MAY RESULT IN DISQUALIFICATION FROM CONSIDERATION. IF SELECTED, I AGREE TO COMMIT MY TIME, SKILLS, AND RESOURCES TO SUPPORT THE AUTISM FOR LIFE FOUNDATION'S MISSION AND GOALS.

Signature: _____

Date: _____

Please submit your completed application to info@autismforlife.org

Thank you for your interest in joining the Autism For Life Foundation's board. Your dedication and expertise can make a significant impact on the lives of individuals with autism and/or neurodiversity. We appreciate your commitment to our cause.