



Our mission is raising substance use disorder awareness, providing support and resources, promoting recovery, and preventing drug abuse in Northwest Pennsylvania.

NOT ONE MORE | NORTHWEST PA BOARD OF DIRECTORS APPLICATION

DATE POSITION PREFERENCE

PERSONAL INFO

<input type="text"/>	<input type="text"/>	<input type="text"/>		
FIRST NAME	MI	LAST NAME		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
STREET ADDRESS		CITY	STATE	ZIP
<input type="text"/>	<input type="text"/>			
PHONE	E-MAIL			<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>		
BIRTH DATE	PRONOUNS	FAVORITE DESSERT		

EMPLOYER

<input type="text"/>	<input type="text"/>			
EMPLOYER	JOB TITLE			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
STREET ADDRESS	CITY	STATE	ZIP	
<input type="text"/>	<input type="text"/>			
PHONE	E-MAIL			
<input type="text"/>				
BUSINESS TYPE				

SERVICE

PLEASE LIST BOARDS AND COMMITTEES THAT YOU SERVE ON, OR HAVE SERVED ON (BUSINESS, CIVIC, COMMUNITY, FRATERNAL, POLITICAL, PROFESSIONAL, RECREATIONAL, RELIGIOUS, SOCIAL).

ORGANIZATION	ROLE/TITLE	DATES
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

SKILLS

EDUCATION/SCHOOL/TRAINING/CERTIFICATES/SKILLS/AWARDS

CONNECTIONS

PLEASE LIST ANY GROUPS, ORGANIZATIONS OR BUSINESSES THAT YOU COULD SERVE AS A LIAISON TO ON BEHALF OF NOM | NWPA.

INTERESTS

**WHAT DRIVES YOU? WHAT ARE YOU INTERESTED IN HELPING OUT WITH AT NOM | NWPA?
CHECK ALL THAT APPLY! CHECK AREAS YOU WANT TO LEARN ABOUT!**

- | | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> ADVOCACY | <input type="checkbox"/> ACCOUNTING | <input type="checkbox"/> POLICY |
| <input type="checkbox"/> OUTREACH | <input type="checkbox"/> GRAPHIC DESIGN | <input type="checkbox"/> COMMUNITY SERVICE |
| <input type="checkbox"/> EDUCATION | <input type="checkbox"/> EVENTS | <input type="checkbox"/> ADMINISTRATION |
| <input type="checkbox"/> MESSAGING | <input type="checkbox"/> TRANSPORTATION | <input type="checkbox"/> WEB DEVELOPMENT |
| <input type="checkbox"/> FUNDRAISING | <input type="checkbox"/> SUPPORT | <input type="checkbox"/> PUBLIC RELATIONS |
| <input type="checkbox"/> PROGRAMMING | <input type="checkbox"/> STIGMA | <input type="checkbox"/> GRIEF |
| <input type="checkbox"/> SOCIAL MEDIA | <input type="checkbox"/> COMMUNICATIONS | <input type="checkbox"/> GRANT WRITING |
| <input type="checkbox"/> NALOXONE | <input type="checkbox"/> HOUSING | <input type="checkbox"/> PROGRAM EVALUATION |
| <input type="checkbox"/> DEVELOPMENT | <input type="checkbox"/> RECRUITMENT | <input type="checkbox"/> PERSONNEL |

IMPACT STATEMENT

WHY DO YOU SEEK SERVICE WITH NOT ONE MORE | NORTHWEST PA? PLEASE SHARE HOW SUBSTANCE USE DISORDERS HAVE TOUCHED YOUR LIFE. WHAT YOU WOULD LIKE TO SEE THIS GROUP ACHIEVE? HOW DO YOU SEE YOUR ROLE IN ACHIEVING OUR MISSION?

THANK YOU FOR APPLYING!