



**1265 Grey Fox Road, Suite 2
Arden Hills, MN 55112
trellisconnects.org**

Application for Board of Directors

Name: _____

Residential Address: _____

City: _____ County: _____ State: _____ Zip: _____

Primary Phone (used as preferred method of contact): _____

Secondary Phone (if any): _____

Primary Email Address (used as preferred method of contact): _____

Secondary Email Address (if any): _____

Place of Employment (if any): _____

Title at Employment (if any): _____

1. Describe your paid or volunteer experience related to services for older adults and family caregivers, or to other related activities or fields.

2. Describe your leadership experience, including service in the nonprofit sector.

3. Why do you wish to serve on the Board of Directors?

4. What are the ways you envision supporting Trellis' mission?

Background Check Acknowledgement

As a board member, I acknowledge that I may be subject to background checks required of health care entities including:

- US Department of Health & Human Services Office of Inspector General (OIG) List of Excluded Individuals and Entities.
- General Services Administration's (GSA's) System for Award Management (SAM).
- CMS preclusion list (in accordance with CMS requirements and to the extent Delegate is authorized to obtain access to the preclusion list).
- Additional site(s) as may be designated from time to time by the OIG, GSA, CMS or other governmental authority.

Further, I understand that I may be asked to provide additional information to Trellis (i.e., the last 4 numbers of my social security number) if needed and requested.

Signature: _____

You are welcome to attach a biography or curriculum vitae, if available, and return with this application to David Kittelson, Executive Assistant, Trellis, dkittelson@trellisconnects.org.

For more information, contact Dawn Simonson, President and CEO,
651.917.4602 or dsimonson@trellisconnects.org.
Board members generally serve a term of 3 years.

Trellis helps people optimize well-being as they age.