

## **Steps to Becoming A New MDSN Board Member**

1. Prospective Board Members complete Candidate Package and submit.
2. Board prioritizes prospects according to the guidelines set by the Board, and current needs (using the Board Prospect Sheet).
3. Governance Committee schedules meeting with prospect and Board President where MDSN materials, list of committees/task forces, Steps to Becoming a Board Member, and Board Member Expectation Statement are reviewed.
4. If all parties are satisfied, Board President offers position to the Prospective Board member.
5. Prospective Board member is approved at the Annual Meeting in November and formally commits to pledge their service to the MDSN and acknowledge their responsibility as a board member.
6. New Board member attends Annual Meeting, receives Board Handbook and is appointed a Board mentor.
7. Board member starts three year term the following January.
8. After the first quarter year of service, the President, or her appointee, schedules follow up session to respond to questions and get feedback from the new member.

## **Board of Directors Candidate Packet**

### **Purpose**

The purpose of this packet is to provide information in a written form which a prospective Board candidate can review, question and consider as he/she makes the decision to make the commitment to join the Board of the Maine Down Syndrome Network. This is introductory in nature only. If the candidate is selected, additional information and documentation will be included at the time of formal Board orientation.

The following are the contents of the packet:

- ◆ Letter of introduction from Board President
- ◆ Board Member Expectation Statement
- ◆ Candidate Profile
- ◆ Committee Descriptions

### **Candidate Selection**

Usually individuals will be brought to the nominating committee due to a personal knowledge of an individual already actively participating with MDSN or through a personal connection in the community. The nominating committee performs a careful analysis of the candidate, in order to assure a Board membership, which will have the ability to support meeting the mission through establishing policies, programming and fundraising. These individuals need to be visionary and global thinkers assessing the needs of all individuals affected by Down syndrome in the MDSN's geographic service area. Candidates will be notified of their status within seven days following the board vote.

### **Board Meetings**

The Board of Directors meets the first Monday of every other month from 7:00 p.m.-9:30 p.m. Board members are required to attend at least 4 board meetings each year.

You have been recommended as a potential candidate to serve on the Maine Down Syndrome Network Board of Directors. Our mission is driven by volunteer support, and by individuals who have a passion for creating positive outcomes for people with Down syndrome.

We have compiled the enclosed materials to assist you in making a determination of your ability to serve on the Board. We have included a summary of the responsibilities of a director with a general outline of the time commitment involved. There is also a background form we request you complete and send back so the board can vote on your candidacy. Please complete the forms as soon as possible and return them to MDSN at the address below. You can also fax the forms back to us at 866-571-2223.

We look forward to receiving your candidate packet and will keep you informed of your status during the nomination and selection process. The board typically votes on eligible candidates in October and you will be notified shortly thereafter if you have been selected to serve. We appreciate your support and consideration of a board position with the Maine Down Syndrome Network. If you have any questions or need any additional information, please do not hesitate to call me at (866)571-2223, ext. 4.

Sincerely,

Jen Greslick  
Board President

**Mailing address to return packet to:**

Maine Down Syndrome Network  
P.O. Box 705  
Windham, ME 04062

**Or complete online, and email to:** [jen@dsmaine.org](mailto:jen@dsmaine.org).

**Please note the deadline for application is November 3, 2013.**

**Board of Director's Profile Packet**

**Personal Information**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Children's Names/Ages: \_\_\_\_\_

**Company Information**

Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

May we contact you at work? \_\_\_\_\_ Yes \_\_\_\_\_ No

Where would you like MDSN mail sent: \_\_\_\_\_ Home \_\_\_\_\_ Work

**Availability**

**Time  
Commitment**

Please indicate your ability to attend/participate in the following:

- |   |                      |
|---|----------------------|
| _____ Board Meetings 2 <sup>nd</sup> Tuesday every month 7:00-9:30 p.m. | 2.5 hours per month  |
| _____ Committee Meetings as scheduled by committee chairs               | 1-2 hours per month  |
| _____ Strategic Planning done annually                                  | 6-8 hours per year   |
| _____ Attend MDSN sponsored events                                      | 10-20 hours per year |

**Background**

**Please state your motivation for becoming involved with MDSN:**

**Please list your strengths, knowledge, and experience you would bring to the board:**

**Please list any personal experience you have had with Down syndrome, if any:**

**Committee Preference:**

\_\_\_\_\_ Support                      \_\_\_\_\_ Community  
\_\_\_\_\_ Education                      \_\_\_\_\_ Advocacy  
\_\_\_\_\_ Outreach                      \_\_\_\_\_ Fundraising

**Please list three references we can contact to learn more about you:**

**Name:** \_\_\_\_\_ **Phone/Email:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone/Email:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone/Email:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_

**Media Release**

I, \_\_\_\_\_, hereby authorize the Maine Down Syndrome Network to use my name and or photograph in promotional materials and in the media if I am selected as a board member.

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Signature

Date

**Signature Release**

I, \_\_\_\_\_, hereby authorize the Maine Down Syndrome Network to use my electronic signature only when necessary, and only with my prior knowledge on correspondence for the Maine Down Syndrome Network.

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Signature

Date

## MDSN's

### Board Member Expectation Statement

#### **General Expectations**

1. Support the MDSN's mission, purposes, goals, policies, and programs, while knowing its strengths and needs.
2. Suggest possible nominees to the Board who are men or women of achievement who can make significant contributions to the work of the Board and the progress of the MDSN.
3. Support and counsel the President, and Committee Chairs.
4. Serve for a three-year term with the option of submitting your name for additional three-year terms.
5. Be available for phone consultations.
6. Promote a positive image serving as an ambassador for the MDSN.
7. Support a new Board member as a Board Mentor as requested by the President.

#### **Meetings**

1. Prepare for and participate in five Board meetings and one Board retreat per year to the best of your ability. Notify the President if you cannot attend.
2. Serve on at least one committee or task force.
3. Ask timely and substantive questions at board and committee meetings consistent with personal conscience and convictions, while supporting the majority decision on issues decided by the Board.
4. Maintain confidentiality of the board's executive sessions and speak for the Board only when authorized to do so.
5. Suggest agenda items periodically for board and committee meetings to ensure that significant policy-related issues are addressed.

#### **Avoiding Conflicts**

1. Serve the Organization as a whole rather than any special interest group or constituency.
2. Avoid even the appearance of a conflict of interest that might embarrass the board, and disclose any possible conflicts to the board in a timely fashion. (Conflict of Interest document).

### **Fiduciary Responsibility**

1. Exercise prudence with the board in the control and transfer of funds.
2. Faithfully read and understand the MDSN's financial statements and otherwise help the board fulfill its fiduciary responsibility.

### **Fundraising**

1. Play a leadership role in fund development which might include individual solicitation, undertaking special events, writing appeal letters, hosting small gatherings, stewardship of current donors, and/or setting up meetings with prospective donors.
2. Assist the MDSN by implementing fundraising strategies through personal influence on others.
3. Participate actively in MDSN fundraising, special events, programs, and activities to the best of your abilities.