

## Cultivating Inclusion Committee Application Form

Thank you for your interest in serving as a member of The Cultivating Inclusion-Lewis County Committee, which is a subset of the Lewis County Autism Coalition. The Cultivating Inclusion Committee is a space for individuals with disabilities, family members of individuals with disabilities, professionals, as well as other interested community members. The purpose of this committee is to network, help brainstorm ideas to enhance disability inclusion in our community, and provide input for our events, and our school-based grant. The committee meets once a month, on the 3<sup>rd</sup> Thursday at 9am and the meeting lasts 30 minutes to 1 hour, depending on the agenda. There may be opportunities to volunteer at events, providing it works with the member's schedule. Completing this form will give you an understanding of this volunteer position's necessary skills, time, and resource commitments. We recommend reading through the entire application before you begin filling it out.

This application will be kept confidential and on file with the Lewis County Autism Coalition. Applications are used by the Board to identify and evaluate potential committee member candidates.

### Committee Member Responsibilities

1. Serves a minimum of a one (1) year term.
2. Attend a minimum of 75% of Committee meetings (held once a month on the 3<sup>rd</sup> Thursday at 9am, unless otherwise noted).
3. Stays informed about committee matters, is prepared for meetings, and reviews and comments on minutes or other topics, as necessary.
4. Volunteer, as able, at events and/or procuring donations.
5. Builds a respectful and congenial relationship with other committee members, contractors, and volunteers.
6. Participates in the advancement of Cultivating Inclusion Lewis County's missions and supports the vision.

**Our mission:** Cultivating Inclusion – Lewis County promotes a welcoming culture for people of all abilities. We act in meaningful ways that inspire, support and celebrate inclusion.

**Our Vision:** Lewis County welcomes all people with respect, acceptance, understanding and engagement at school, work, and in our community.

## Candidate Information

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

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

City: \_\_\_\_\_ State: WA Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Company: \_\_\_\_\_

Number of years with present company: \_\_\_\_\_

Number of years lived or worked in Lewis County: \_\_\_\_\_

Educational Background: \_\_\_\_\_

Work Background: \_\_\_\_\_

Do you have experience in the disability community? \_\_\_\_\_

\_\_\_\_\_

Volunteer/Community Activities: \_\_\_\_\_

Anything you would like us to know: \_\_\_\_\_

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