

## AOASCC Current Board Profile 2020

1. AOASCC by-laws require 51% of Board members to be 60 or older, what is your age?

- |                                |                                      |
|--------------------------------|--------------------------------------|
| <input type="checkbox"/> 20-29 | <input type="checkbox"/> 60-69       |
| <input type="checkbox"/> 30-39 | <input type="checkbox"/> 70-79       |
| <input type="checkbox"/> 40-49 | <input type="checkbox"/> 80-89       |
| <input type="checkbox"/> 50-59 | <input type="checkbox"/> 90 or older |

2. AOASCC by laws require geographic representation of our service area, where do you live?

- |                                     |  |
|-------------------------------------|--|
| <input type="checkbox"/> Ansonia    | <input type="checkbox"/> New Haven         |
| <input type="checkbox"/> Bethany    | <input type="checkbox"/> North<br>Branford |
| <input type="checkbox"/> Branford   | <input type="checkbox"/> North Haven       |
| <input type="checkbox"/> Derby      | <input type="checkbox"/> Orange            |
| <input type="checkbox"/> East Haven | <input type="checkbox"/> Oxford            |
| <input type="checkbox"/> Guilford   | <input type="checkbox"/> Seymour           |
| <input type="checkbox"/> Hamden     | <input type="checkbox"/> Shelton           |
| <input type="checkbox"/> Madison    | <input type="checkbox"/> Wallingford       |
| <input type="checkbox"/> Meriden    | <input type="checkbox"/> West Haven        |
| <input type="checkbox"/> Milford    | <input type="checkbox"/> Woodbridge        |

Other (please specify): \_\_\_\_\_

3. Please tell us about your areas of training, expertise and/or experience.

	<b>N/A</b>	<b>A Little</b>	<b>More than Average</b>	<b>A Lot</b>
Administration/management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AAA Advisory Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advocacy/public policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caregiving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entrepreneurship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial: accounting/auditing/budgeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial: investments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fundraising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gerontology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Government: legislative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please tell us about your areas of training, expertise and/or experience.

	<b>N/A</b>	<b>A Little</b>	<b>More than Average</b>	<b>A Lot</b>
Government: administrative departments and agencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Board governance/nonprofit management/other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grantsmanship: research/writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care/medicine/geriatrics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pastoral counseling/care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Real estate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Media	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): _____				

4. These items are optional. We ask as part of our commitment to diversity and inclusion, reflective of the community we serve. Please check any that apply. Do you consider yourself . . .

- |  |   |
|--|---|
| <input type="checkbox"/> African American/Black  | <input type="checkbox"/> Non-Binary                               |
| <input type="checkbox"/> Asian/Pacific Islander  | <input type="checkbox"/> LGBTQ+                                   |
| <input type="checkbox"/> Caucasian/White         | <input type="checkbox"/> Self-employed Employed                   |
| <input type="checkbox"/> Hispanic/Latinx         | <input type="checkbox"/> Retired                                  |
| <input type="checkbox"/> Native American/ Indian | <input type="checkbox"/> Veteran                                  |
| <input type="checkbox"/> Other race/ethnicity    | <input type="checkbox"/> Have a disability or disabling condition |
| <input type="checkbox"/> Man                     |   |
| <input type="checkbox"/> Woman                   |   |

Other (please specify) Anything else you would like to tell us about yourself?

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### 5. Your community connections

- |  |  |
|--|--|
| <input type="checkbox"/> Corporate Education       | <input type="checkbox"/> Philanthropy                  |
| <input type="checkbox"/> Faith-based organizations | <input type="checkbox"/> Political                     |
| <input type="checkbox"/> Health Care               | <input type="checkbox"/> Small business Social service |
| <input type="checkbox"/> Media                     |  |

Other (please specify)

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### 6. Tell us about your personal qualities and style

- |   |   |
|---|---|
| <input type="checkbox"/> Leadership skills/motivator          | <input type="checkbox"/> Implementer/gets things done                                     |
| <input type="checkbox"/> Willingness to work/availability     | <input type="checkbox"/> Strategist/asks great questions                                  |
| <input type="checkbox"/> Personal connection with the mission | <input type="checkbox"/> Visionary  |
| <input type="checkbox"/> Catalyst for change                  | <input type="checkbox"/> Money to give  |
| <input type="checkbox"/> Consensus builder                    | <input type="checkbox"/> Access to other potential individual donors                      |
| <input type="checkbox"/> Good communicator                    | <input type="checkbox"/> Access to other resources (e.g., foundations, corporate support) |
| <input type="checkbox"/> Mediator                             |   |

Other (please specify) Anything else you would like to share with us?

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### 7. Thank you for your time. Please add any comments you might have.

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