

**Biographical Data Sheet for
Community Investment and Review Volunteer**

United Way
of the Lakeshore



Name: _____ County: _____

Title: _____ United Way Donor: ___ yes ___ no

Employer/Firm: _____

Union Affiliation: _____

Work Address: _____

City and Zip Code: _____

Work phone: _____ fax: _____

Work Email: _____

Home Address: _____

City and Zip Code: _____

Home Phone: _____ cell: _____

Home Email: _____

Contact preference: work _____ home _____

Please list current or past involvement with United Way (e.g. community investment volunteer, donor, campaign coordinator or committee member, loaned executive, board member, etc.):

Please list current or past involvement with any other local community organizations and any current or past board membership/affiliation with non-profit health and human service organizations:

Please indicate your first, second and third choices on the areas in which you would like to serve:

- _____ Income (Long-term Self-Sufficiency: Job, Savings, Transportation, Childcare, Housing, Utilities)
- _____ Education (Building an Educated Workforce)
- _____ Health (Healthy & Safe Individuals and Families)

Please complete & return this form to be on the committee. Email wynoice@unitedwaylakeshore.org; fax (231-722-3137); or mail United Way of the Lakeshore, attn: Wynoice Hairston, PO Box 207, Muskegon MI 49443-0207.