

Nominate Yourself for the MCN Board of Directors

Thank you for your interest in the Minnesota Council of Nonprofits (MCN) Board of Directors! We're glad you've decided to submit your name for consideration.

MCN is a membership-based organization, representing a wide range of nonprofit organizations throughout Minnesota. We strive to recruit board members who bring diverse perspectives, professional expertise, and lived experiences to ensure MCN continues to live into our [stated values](#), which were jointly created in 2023 with MCN staff and board.

Please complete the questions on the following pages to complete your nomination. The deadline for submitting a completed nomination form is by 11:59 PM on August 4, 2024.

Please note:

- Prior to submitting your application, please ensure that you carefully read the [Expectations of MCN Board Members](#).
- After you hit 'submit' on the final page of this form, you will be emailed a copy of your nomination for your records.
- You will be notified of your nomination status in September.

If you have any questions about the nominations process, please contact Mark Buenaflor, Operations Manager at 651-757-3066 or mbuenaflor@minnesotanonprofits.org.

Complete Your Nomination for the MCN Board of Directors – Verification of Qualifications

- I have read the Expectations of Nominees to MCN's Board of Directors and agree that I can fulfill those expectations and responsibilities. *
 - I agree
- All candidates for member-representative positions must be current MCN nonprofit member organizations. Please confirm that your organization is an MCN nonprofit member. If you are not sure if your organization is a member or would like to join, please contact MCN at 651-642-1904 or info@minnesotanonprofits.org. *
 - My organization is a current MCN nonprofit member

Complete Your Nomination for the MCN Board of Directors – Applicant Information

1. Nominee's First Name *
2. Nominee's Last Name *
3. Nominee's Title
4. Nominee's Organization *
5. A number of years ago, MCN started collecting self-identifying demographic information for all board and staff, which MCN is often required to report to foundations in grant applications, as well as in surveys about the nonprofit sector. More importantly, collecting this information allows MCN to be more intentional in ensuring our board can reflect the broad and diverse nonprofit sector and the communities they serve.
 - a. What is your race/ethnicity?
 - i. Black/African American/African
 - ii. Hispanic/Latino/Latina/Latinx
 - iii. Native American/American Indian/Indigenous
 - iv. Asian/Pacific Islander
 - v. White/Caucasian/European
 - vi. Multi-Racial/Multi-Ethnic (2+ races/ethnicities)
 - vii. Decline to state
 - viii. Unknown

6. What is your gender identity?
7. What is your age?
8. Please describe any current or past involvement you have had with MCN (including attending events, serving on committees, speaking or presenting at a workshop, participating in a Leadership Institute, etc.). *
9. Please provide a brief statement describing why you would make a good candidate for the MCN board of directors. Please describe how your applicable perspective, expertise and experiences would contribute to helping set the direction for an association of nonprofits. *
10. What else would you like us to know about you? What identities, experiences, expertise or unique perspective would you bring to your service on the nonprofit board?
11. Please describe your professional and educational background, including current and previous positions, major projects, volunteer and other leadership roles, educational degrees, etc. Alternately, you may submit a copy of your resume below.
 - a. Attach a copy of your resume. (This is optional if you answered the question above.) File size must be 1 MB or smaller; PDF is preferred. PLEASE LIMIT ATTACHMENTS TO 5 PAGES OR LESS.
12. Nominee's Address *
13. Nominee's City *
14. Nominee's Zip Code *
15. Nominee's Phone Number *
16. Nominee's Email Address *
17. Please provide a short description of the work of your organization: *
18. Please provide information about your organization's geographic scope of work (even if your organization covers several regions, please choose the option that best fits your organization): *
 - a. Local (city, neighborhood)
 - b. County-Wide (one county)
 - c. Regional within MN (multi-county)
 - d. Statewide
 - e. Multi-State
 - f. National
 - g. International
19. In which county is your organization's primary location based? *
20. Please select the range that best describes your organization's current year operating expenses: *
 - a. \$0-\$99,999
 - b. \$100,000 - \$199,999
 - c. \$200,000 - \$399,999
 - d. \$400,000 - \$699,999
 - e. \$700,000 - \$999,999
 - f. \$1 million - \$2 million
 - g. \$2 million - \$3 million
 - h. \$3 million - \$5 million
 - i. \$5 million - \$10 million
 - j. above \$10 million
21. Please select the one activity area that best describes your organization's work: *
 - a. Arts, Culture & Humanities
 - b. Education
 - c. Environment
 - d. Animal-Related
 - e. Health Care
 - f. Mental Health & Crisis Intervention
 - g. Voluntary Health Associations & Medical Disciplines
 - h. Medical Research
 - i. Crime & Legal-Related

- j. Employment
 - k. Food, Agriculture & Nutrition
 - l. Housing & Shelter
 - m. Public Safety, Disaster Preparedness & Relief
 - n. Recreation & Sports
 - o. Youth Development
 - p. Human Services
 - q. International, Foreign Affairs & National Security
 - r. Civil Rights, Social Action & Advocacy
 - s. Community Improvement & Capacity Building
 - t. Philanthropy, Voluntarism & Grantmaking Foundations
 - u. Science & Technology
 - v. Social Science
 - w. Public & Societal Benefit
 - x. Religion-Related
 - y. Mutual & Membership Benefit
 - z. Other
22. Do you consider yourself a direct service organization? Feel free to expand on your organization's focus area here.
23. Does your organization serve a specific community (geographic, racial/ethnic, identity)? If so, please describe. Do you have personal experience as part of this community?
24. Please note, those nominees who are not the chief executive of their organization will be asked to also submit a Support Form signed by the organization's chief executive or board chair, indicating that their organization will give them appropriate time away from work to carry out their board duties. *
- a. I am my organization's chief executive - no support form required
 - b. I am not my organization's chief executive - support form has been sent

**required*