

Advisory Board Member Position Description



Community Partnership on Aging was established in 1978 as a cooperative agreement between the cities of Lyndhurst, South Euclid and Highland Heights to meet the needs of older adults, their caregivers, and families. In 2011, Mayfield Heights became a member, followed by Mayfield Village in 2012. Our mission is to improve lives through programs and services that support independence, community involvement, and well-being. This is carried out through planning, coordinating, and providing services that enhance the dignity, security, and overall well-being of the older adults in our communities. Current programs and services include transportation, a congregate meal program delivered weekdays, and supportive services. In addition, the agency provides counseling, volunteers, homemaker services, health, wellness, civic and social opportunities and assists older adults in maintaining independence in their homes. There are 19 staff and over 200 volunteers that help carry out the mission.

Position Overview: The advisory board member's role is to be an active volunteer who demonstrates a commitment to advancing the mission of Community Partnership on Aging.

Reports to: Advisory Board Chair

Specific Duties:

- Serves as an active ambassador
- Participates in fundraising and development efforts
- Serves on at least one subcommittee
- Shares expertise to advance Community Partnership on Aging's organizational capacity
- Attends required meetings to occur at least monthly
- Communicates effectively with other advisory board members and director in a timely manner

Position Requirements

- Live, work, or display a vested interest in the service area
- Must be 21 years of age or older
- Experience working independently as well as part of a team
- Interest in aging issues
- Ability to attend regular meetings

Community Partnership on Aging Advisory Board Application



Improving lives through programs and services that support independence, community involvement, and well-being.

Date of Application (Month/Day/Year) / /	How were you referred to us?
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Full Name:

Address:

City:

State:

Zip:

Home Phone:

Mobile:

E-Mail:

Preferred method of contact:	How many hours can you commit per week or month? /
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Circle the category that best describes yourself.

21 - 30	31 - 40	41 - 50	51 - 60	61 - 70	71 - 80	81 - 90	90 +
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Current Employer:

Preference is given to those who live, work, or have a vested interest in a Community Partnership on Aging service area.

Answer the following questions to the best of your ability. If you are unable to answer a question, you may leave it blank.

What is your knowledge of, or experience with, Community Partnership on Aging services?

What motivated you to apply for the board position?

Please list any community organizations you have been involved with in the last ten years.

What do you identify as major issues regarding older adults?

Describe additional skills or personal experiences you think would benefit to the Advisory Board.

Are you an officer or employee of any organization that is funded by or provides services to Cuyahoga County Government?

References	Please list three professional (preferred), personal, or a combination of references, unrelated to you by marriage or blood.			
	Name	Address	Phone & E-mail	Nature of Relationship
One				
Two				
Three				

Signature: _____

Date: _____

To submit your application, please mail it to:
 Community Partnership on Aging, Attn: Advisory Board
 1370 Victory Drive, South Euclid, Ohio 44121-3629