Judgment Fund Committee Questionnaire

Name: _____

Address: _____

Contact Number: _____

Tribal Affiliation: _____

Please answer the following questions. All questions must be answered to be considered for board placement.

1. Tell us why you want to be on the Judgment Fund Committee.

   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____

2. Tell us what you know about the Judgment Committee. (Roles/Responsibilities)

   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____

_____
_____
_____

3. Tell us what you will bring to the Judgment Fund Committee.

_____
_____
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_____
_____
_____

(For Judgment Fund Committee use only)

Date Received: _____
Who Received: _____
Approval Date: _____
Date of meeting this was approved: _____
Vote: Yes: _____
No: _____