Architectural Review Board (ARB) Board Member Application 2018

Personal Name:	
	Sea Pines Owner Since:
Spouse/Partner Name:	
	Sea Pines Home Phone:
Mailing Address:	
Email Address:	
If currently employed	
Business Name:	
Position:	Business Phone:
	s or licenses that you hold:
Community Service Experie	ence
Please list current and previous con	mmunity service activities, interests, directorships, etc public and private.
For each activity indicate the years	served and positions held:

Specialized Skills You Would Bring to the ARB	
Other Relevant Activities, Exp	erience, Interests, etc.
Please list other activities, knowledge,	or professional experience that would contribute to your effectiveness as
an ARB Board Member:	
Reasons for Volunteering	
Please state briefly why you are volunt	teering to serve on the ARB:
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Request from the Nominating Commi	ttee:
,	sted that you provide a brief resumé with your application.
The Horimiating Committee has reques	sted that you provide a site resume with your approachem
Signature:	Date:
Deadline to Apply: August 1, 2018	
Please Return Application to:	
Sandra Archer, Execut	ive Administrative Assistant
Community Services A	ssociates, Inc. 175 Greenwood Drive, Hilton Head Island, SC 29928
sandra@csaseapines.c	com
	For ARB Office Use Only:
Date of Receipt:	Received By: