

# Co-Dependents Anonymous

PO BOX 33577, Phoenix, AZ 85067-3577

## APPLICATION FOR BOARD OF TRUSTEES OF CO-DEPENDENTS ANONYMOUS, INC.

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ VOTING ENTITY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PROVINCE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

TELEPHONE NUMBERS: (H) \_\_\_\_\_ (W) \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

**DIRECTIONS:** Answer each item below as fully as possible on separate paper. Please type or word-process for legibility. Do not attach a resume.

- 1) Describe your current working knowledge of the *Twelve Steps* and *Twelve Traditions*, and the CoDA foundational documents, such as the Fellowship Services Manual, By-laws, etc.
- 2) Why do you want to serve the Fellowship as a member of the Board of Trustees?
- 3) Describe your service work on Meeting, Intergroup, Voting Entity level, including number of years of service.
- 4) Describe any personal or professional background that you think would benefit the health of CoDA, such as experience negotiating contracts, general business management, or any other relevant skills.
- 5) Share your:
  - A) Experience with the group conscience process.
  - B) Courage to express yourself, ability to listen, and ability to communicate effectively.
  - C) Ability to manage interpersonal differences and accomplish goals as a group member.
- 6) The job of Trustee has varying time demands. What is your availability?
- 7) Please share your vision for CoDA.
- 8) Please add any additional information you feel may be helpful in the selection process.

### NOTES:

Please send your application to the above address. Refer to "Conference Election Procedures" for details regarding the Election of Trustee at the CoDA Service Conference.