

National Coalition of 100 Black Women, Chattanooga Chapter, Inc.



**MISSION STATEMENT: The mission of the National Coalition of 100 Black Women, Inc. is to advocate on behalf of Black women and girls to promote leadership development and gender equity in the areas of health, education and economic empowerment.**

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All sections of the application must be completed, including your Voter Registration number, and endorsements by two active members. Failure to comply will void your application submission.

(Type or print legibly)

**MEMBERSHIP APPLICATION**

**Personal Information**

Name: \_\_\_\_\_  
Last First Middle Preferred Name

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse: \_\_\_\_\_  
Last First Middle Preferred Name

Church Membership: \_\_\_\_\_

Voter Registration Number: \_\_\_\_\_ Precinct Number: \_\_\_\_\_

Have you been convicted of a felony within the past ten (10) years? Yes\_\_ No\_\_

**Employment Information**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Educational Background**

Complete for all institutions attended

**High School/GED**

Name	Location	Date Graduated	Diploma/Other
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**Undergraduate/Technical School/Other**

Name	Location	Date Graduated	Degree/Diploma
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**Advanced Degree(s)**

Name	Location	Date Graduated	Degree/Diploma
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Name	Location	Date Graduated	Degree/Diploma
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**Professional Background, Recognitions and Affiliations**

Which of the following categories best describes your current position? Circle all that apply.

- |                     |                        |
|---------------------|------------------------|
| Business & Industry | Media/Public Relations |
| Education           | Nonprofit              |
| Entrepreneur        | Religion               |
| Finance             | Social Services        |
| Government          | Technology/Computers   |
| Health              | Medical                |
| Labor               | Other (specify) _____  |
| Law                 |                        |

Briefly describe your employment responsibilities: \_\_\_\_\_

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**Does your employer support employees who are engaged in community and civic activities? If so, explain how?** \_\_\_\_\_

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**List professional awards, honors and achievements you have received that you consider significant.**

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**List your current and/or past professional affiliations.** *(Do not include civic organizations, public office or political activities.)*

Organization and Position Held	Affiliation Dates
	From _____ to _____
	From _____ to _____
	From _____ to _____
	From _____ to _____

**Community Service Participation:**

During the past three years, describe your involvement in two (2) community activities (civic, religious, political, government or social). (Do not include professional activities). Indicate the name of the organization, your assignment/position, and describe your responsibilities and accomplishments for each.

Organization1: \_\_\_\_\_  
Name Assignment/Position

What did you do? \_\_\_\_\_

Organization2: \_\_\_\_\_  
Name Assignment/Position

What did you do? \_\_\_\_\_

**List current and/or past community and civic affiliations that align with the NCBW Mission.**

<b>Organization</b>	<b>Position Held</b>	<b>Affiliation Dates</b>
_____	_____	_____ to _____
_____	_____	_____ to _____
_____	_____	_____ to _____
_____	_____	_____ <b>to</b> _____
_____	_____	_____ <b>to</b> _____

**Program Participation, Contributions and Commitment**

**What National Coalition of 100 Black Women, Chattanooga Chapter, Inc. events have you attended and/or supported? When?**

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**Why do you want to join National Coalition of 100 Black Women, Chattanooga Chapter, Inc?**

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**What value will you add to National Coalition of 100 Black Women, Chattanooga Chapter, Inc. that will help promote the local and national organization’s mission?**

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**Indicate the following area(s) that best describe your area of expertise. Circle all that apply.**

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|-------------------------------------|------------------------------|
| Advocacy                            | Technology/Computers/Website |
| Fundraising                         | Management                   |
| Grant Writing                       | Women’s Rights Issues        |
| Health                              | Medical                      |
| Law                                 | Administrative/Clerical      |
| Mentoring                           | Marketing                    |
| National/Local /Legislative Affairs | Social Media                 |
| Other _____                         | Other _____                  |

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*Membership requirements and responsibilities as an active member include participation in National Coalition of 100 Black Women, Chattanooga Chapter, Inc. organization activities, attendance at bi-monthly membership meetings, and support of National Coalition of 100 Black Women, Chattanooga Chapter, Inc. fundraising activities.*

**THE ORIENTATION PROCESS FOR NEW MEMBERS IS MANDATORY AND INCLUDES ALL ACTIVITIES!** Will you commit to attending all sessions? Yes \_\_\_\_ No \_\_\_\_.

Questions concerning membership requirements should be directed to the National Coalition of 100 Black Women, Chattanooga Chapter, Inc. **3<sup>rd</sup> Vice President-Membership: Elizabeth Appling at email: [lizapplin@bellsouth.net](mailto:lizapplin@bellsouth.net) or call 423-463-1854. ONLY**

Use the area below ONLY for any additional comments, etc.

### Applicant's Statements

In order to be accepted for membership in the National Coalition of 100 Black Women, Chattanooga Chapter, Inc. (NCBW), I understand that I:

- Must commit and be an active member willing to devote time to the interest, goals and objectives of National Coalition of 100 Black Women, Chattanooga Chapter, Inc.
- Must be a U.S. citizen, registered voter, and of sound moral character;
- **Must submit to and pay the expense for a background check;**
- Am aware of the many problems facing women today both in the home and in the business community and that I am willing to be an advocate for the empowerment of women and use my experience, expertise and influence to improve the status of all women;
- Must have demonstrated active or past participation in community service (i.e., social, cultural, educational, political or religious);
- Must be sponsored by two (2) financial and active members;
- Have resided in Hamilton County or in a county that is within a 30-mile radius of Hamilton County corporate limits one year prior to my application for membership.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Sponsoring Member's Statement

\_\_\_\_\_  
NCBW Sponsoring Member's Signature

Sponsoring Member's Statement

\_\_\_\_\_  
NCBW Sponsoring Member's Signature

### **Application Procedures**

1. Applications may be obtained from any member of the National Coalition of 100 Black Women, Chattanooga Chapter, Inc.
2. Application must be completed and postmarked no later than **June 5, 2021**, with required signatures, a (headshot) black and white photo or color photo; two sponsoring members' statements; and membership fee of \$500.00. **Failure to include any of these items will result in application being denied.**
3. Applicant must be available for a scheduled interview during the month of June 2021 with the Membership Committee.
4. **Because of COVID-19 Restrictions, additional pages may be added for sponsor's recommendations and signature (ONLY).**
5. Applications that meet the membership criteria, including results of a successful background check, will be presented to the general membership for voting at the **July 2021** Membership meeting. All applicants will be notified of their acceptance or non-acceptance. Successful applicants must remit an installation fee of \$75 within one (1) week of notification of membership acceptance. The \$500 membership fee will be refunded within 30 days of the July 2021 meeting to applicants whose memberships were not approved.
6. Application, black and white/or color photo and \$500.00 membership fee made payable to National Coalition of 100 Black Women, Chattanooga Chapter **must be mailed to:**

**National Coalition of 100 Black Women, Chattanooga Chapter, Incorporated  
Attention: Membership Committee  
Post Office Box 22873  
Chattanooga, TN 37422-2873**

7. Late applications or applications received in envelopes that have not been postmarked by the required **June 5, 2021** date will not be processed. **Do not hand-deliver or give application to any National Coalition of 100 Black Women, Chattanooga Chapter, Inc. member to submit.**
8. Results of your background check **should be mailed (by company) to Elizabeth Appling, Membership Chair, P. O. Box 22873, Chattanooga, TN 37422-2873.**

**DO NOT ADD ANY ADDITIONAL SHEETS TO APPLICATION!**

Members

**Deborah A. Flagg, President**

Amaker	Valerie	Malone	Angela
Appling	Elizabeth	Mason	Patricia *
Armstrong	Valoria V.	Mathis	Amanda 'Vickie'
Biggs	Kendra	Mayfield	Leslie
Bone	Johnnie	McKeldin	Gloria S.
Brewer	Valencia	McKeldin	Beverly A.
Bryant	Tara	McReynolds	Karen
Burke	Jasmine	Merrell	Renee' B.
Canion	Colleen	Morris	Michalle
Dobard-Hall	Ernestine Tina	O'Neal	Carol K. *
Edwards	Faith R.	Peebles	Veronica
Edwards	Nikita	Pierce	Mia Francette
Favors	JoAnne *	Rashed	Christy E.
Fielder-Gibson	Tina	Ruffin	Kia
Flagg	Deborah	Russell	Rosie
Grant	Shawanna L.	Scott	Barbara M.
Hereford	Ruthie	Settles	Eva M.*
Jackson	Vanessa A.	Shackleford-Gray	Patricia
Johnson	Beverly P. *	Smith	Michiba L.
Jones	Carolyn *	Turner	Bernadine *
Jones-Ellis	Deborah	Ulmer	Juanita Dawson
Keith	Sheila D. *	Underwood-Williams	Patricia *
Kellum	Theresa Vickie	Upton	Tabi
Love	Angela	Ware	Karen
Love-England	Tiundra	Wigfall	Mary
Madding	Jacquen	Woodard-Thompson	Charlesetta *
		Woods	Reinza J.
		Woods	Roshonda

\*Charter Member



\_\_\_\_\_ DO NOT WRITE BELOW THIS LINE \_\_\_\_\_

**NCBW Membership Committee-ONLY**


**Elizabeth Appling NCBW 2021 Membership Chair**