



MENTAL HEALTH ASSOCIATION OF SAN FRANCISCO  
870 MARKET STREET, SUITE 928  
SAN FRANCISCO, CA 94102  
PH: (415) 421-2926 | FAX: (415) 421-2928  
[www.mentalhealthsf.org](http://www.mentalhealthsf.org)

## **MHASF Board of Directors Board Member Job Description & Application Instructions**

### **Position**

Board Member

### **Authority and Responsibility**

The Board of Directors is empowered by the state to govern the Mental Health Association of San Francisco as a nonprofit public benefit corporation on behalf of the people of California.

### **Commitment to the Purposes and Goals of MHASF**

Board members share a commitment to promote mental health and wellness within the community, advance services and resources to counter mental health challenges and public stigma, and to support the values and mission of MHASF in all its efforts both public and private.

### **Board Composition and Term of Service**

The MHASF Board of Directors is developed to include a diversity of professional and personal skills and assets relevant to the organization's success. MHASF strongly encourages interest from individuals with personal lived experience of mental health conditions and those who identify as consumers of mental health services in San Francisco.

A term of office is two (2) years, with a limit of three (3) terms or six (6) consecutive years.

### **Individual Responsibilities**

Board Members commit to do the following when accepting an appointment to the Board of Directors:

- Attend, at minimum, two-thirds (66%) of bi-monthly General Board Meetings
- Serve on at least one Board committee
- Support and participate in fundraising and special events
- Participate in solicitation of donations by corporations, foundations, and individuals
- Increase MHASF's earned income through promotion of the MHASF Membership program
- Contribute or procure monetary or in-kind gifts in financial support of MHASF, at the \$500+ level or according to ability to give
- Be well-informed about the association's programs, policies, and services
- Maintain a high degree of familiarity with the issues, concerns, and trends in the field
- Demonstrate commitment to the work of the organization

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**The mission of the Mental Health Association of San Francisco is to cultivate peer leadership, build community, and advance social justice in mental health.**

## Shared Responsibilities

The Board as a whole is accountable for the following:

- Set policy for the organization
- Approve the hiring and evaluation of the Executive Director and the Executive Director's employment contract
- Assure MHASF's compliance with all applicable local, state, and federal laws
- Develop and execute MHASF's strategic planning process and activities
- Review bylaws and policies, approve changes, and prepare necessary amendments
- Develop and maintain positive relations among the Board, committees, staff members, and community to enhance MHASF's mission
- Ensure the future governance of MHASF through recruitment of new Board members
- Authorize the person keeping the association's books of account
- Evaluate the performance of the Board as a whole, as well as each individual member of the Board, relative to this job description

## Evaluation

A Board Member's performance is evaluated annually, through a self-evaluation process, based on performance of assigned individual and shared responsibilities.

## TO APPLY

An application to the MHASF Board of Directors must include:

- 1) A completed Board Member **application form** (see attached)
- 2) A **cover letter** describing your interest in serving on the MHASF Board of Directors and addressing the following questions:
  - a. What in your life has inspired or motivated you to connect with the mission of MHASF?
  - b. What would you say are the most important things our community could do to support the recovery of people with mental health conditions and advance social justice related to mental health?

Send your application form and cover letter to the MHASF Board Liaison through one of the following methods:

**Email** – [careers@mentalhealthsf.org](mailto:careers@mentalhealthsf.org)

**Fax** – (415) 421-2928

We thank you for your interest, and look forward to hearing from you soon!



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**Board of Directors Application Form  
Personal and Professional Profile**

**Applicant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CONTACT INFORMATION**

**Primary Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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

**Work Address:** \_\_\_\_\_

**Mailing Preference:**    Home    Work

**PROFESSION**

**Profession or industry:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Length of time in position:** \_\_\_\_\_

**Please briefly describe your work:**

**EDUCATION**

**Degree earned:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

**Degree earned:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

**Degree earned:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

## MEMBERSHIPS, AFFILIATIONS & VOLUNTEER WORK

## POLITICAL OFFICES & CIVIC APPOINTMENTS HELD

## OTHER ACCOMPLISHMENTS & HONORS

## KNOWLEDGE & SKILLS

Use the checkboxes below to indicate the areas in which you would like to use your knowledge and skills to support the work and growth of MHASF:

Mental Health Issues – Public Education  
Mental Health Issues – Policy & Advocacy  
Mental Health Issues – Adults  
Mental Health Issues – Children & TAY  
Self-Help & Peer Support Groups  
Housing/Homelessness  
Finance  
Law  
Insurance/Risk Management Fundraising  
Corporate & Foundation Relations  
Marketing/Public Relations

Grant Writing  
Business Management  
Nonprofit Management  
Human Resources  
Education  
Public Policy  
Event Planning  
Public Speaking  
Other:

**COMMITTEE INTEREST**

Please select at least one of the following:

- Internal
- External
- Finance
- Public Policy
- Fundraising
- Nominations

**BOARD COMPOSITION & REPRESENTATION (Optional)**

To ensure that we are representing the diverse communities of San Francisco, we appreciate you providing us with the demographic information requested below.

**Self-Identification (select all that apply):**

- Person with lived experience of mental health and/or substance use recovery
- Family member of someone with a mental health condition
- Community advocate or activist
- Service provider
- Other:

**Race:** \_\_\_\_\_ **Ethnicity:** \_\_\_\_\_

**Gender:** \_\_\_\_\_ **Sexual Orientation:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Annual Income:** \_\_\_\_\_ **Do you identify as having a disability?** \_\_\_\_\_

**Type(s) of disability:** \_\_\_\_\_

**REFERENCES**

Please include three (3) references we may contact about your candidacy.

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Employer/Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Employer/Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

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