



# NON PROFIT BOARD MEMBER SURVEY

## ► Organization Name:

Please take a few minutes to complete the following Non Profit Board Member Survey. The objective of the survey is to assess the current board member experience and potentially uncover development opportunities. Thank you for your participation!

## ► Name (Optional):

1 How long have you been a member of the Board?

- < 1 year       1 to 2 years       3 to 4 years       >= 5 Years

2 How would you rate your personal level of Board involvement?

- Not Very Involved       Somewhat Involved       Active       Very Active

3 Are you currently part of a Board working committee?

- No       Yes       Prefer Not To Respond

a If yes, how would you rate this experience? Please explain if your rating is below Good.

- Poor       Fair       Good       Excellent

4 Have you ever served on a Board other than this one?

- No       Yes       Prefer Not To Respond

a If yes, how would you compare that experience to your current experience with this Board?

- Less Satisfying       About The Same       Better       No Comparison



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5 How would you rate your satisfaction with your understanding of role of the Board and how you fit into this picture?

Dissatisfied

Satisfied

Somewhat Satisfied

Very Satisfied

6 How would you rate your overall satisfaction with your board experience to date?

Dissatisfied

Satisfied

Somewhat Satisfied

Very Satisfied

7 What do you like best about your Board experience (Please Explain)?

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8 What do you like least about your Board experience (Please Explain)?

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9 What is one thing that the Board could be doing differently to enhance your personal experience?

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10 Please rate your satisfaction across the following categories (select one box only):

| Issue                                       | Dissatisfied             | Somewhat Satisfied       | Satisfied                | Very Satisfied           | If your rating is below Satisfied, please explain: |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--|
| Overall Impact of Board on the Organization | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board Leadership                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Contribution of other Board Members         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Progress/Results of Working Committees      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| <b>Number of responses</b>                  |                          |                          |                          |                          |  |





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| lines   | Disastisfied             | Somewhat Satisfied       | Satisfied                | Very Satisfied           | If your rating is below satisfied, please explain: |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--|
| Board Performance in Governance Role                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board Performance in Fundraising Role                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board Performance in Volunteer Role                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board Member Composition                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board Development/Training Activity                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board's Relationship with Executive Director/CEO (ED)     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board's Ability to Hold ED Accountable for Results        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board's Ability to Hold Itself Accountable for Results    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board's Ability To Stay Focused On Board Responsibilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Quality of Board Meetings                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Management of Board Meeting Logistics                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board's Decision-Making Process                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Board's Ability To Have Constructive Conflict             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Time Requirements of Board Role                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| Your Ability To Make A Difference In Your Board Role      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| <b>Number of responses</b>                                |                          |                          |                          |                          |  |



# NON PROFIT BOARD MEMBER SURVEY

11 What are the specific skills/strengths that you feel you bring to the Board?

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a How well do you think this Board leverages your particular skills/strengths?

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12 Where would you like to see the organization focus its Board development efforts over the next 2-3 years?

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13 If there was one thing that the Board could do to enhance its effectiveness, what would it be?

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# NON PROFIT BOARD MEMBER SURVEY

14 In terms of membership, where do you think the Board has its greatest needs/challenges?

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15 Please rate your interest in continuing as a Board member once your current term expires.

Not Interested

Interested

Somewhat Satisfied

Very Interested

16 Please feel free to add any additional comments or suggestions to help the Board maximize your experience and/or the Board's effectiveness

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***Thank you for participating in this survey! Your feedback will help us improve the board experience and maximize our overall impact.***