



BOARD MEMBERSHIP INFORMATION

Sonoma Valley Community Health Center (SVCHC) is actively seeking patients and community members who may be interested in filling an open seat on our Board of Directors. SVCHC is a certified Federally Qualified Health Center that is governed by a thirteen member volunteer Board. The Board consists of six members from the community at large and seven members from our patient population who represent the diverse cultures seen at the Health Center. Board terms are usually for three years and members are eligible for re-election after that time.

SVCHC is a non-profit 501(c)(3) located at 19270 Sonoma Highway in Sonoma, CA. In addition, SVCHC operates a mobile medical clinic to provide school and community based health care services in the Springs. Our mission is to provide accessible quality health care to those who need it, especially the underserved. Our vision is to be recognized as a leader in providing patient and community centered care in collaboration with other organizations.

SVCHC is the largest primary care practice in Sonoma Valley, providing services for over 7000 individuals a year (27,500 visits). Over 200 women each year receive prenatal care at SVCHC and about 90% deliver at Sonoma Valley Hospital. Seventy-one percent of all women who deliver their babies at Sonoma Valley Hospital come from our prenatal program.

SVCHC is making a real difference in the quality of health care for Sonoma Valley residents, and our Board members are an integral part of what makes it work so well.

If you are interested in becoming a part of our Board of Directors, please complete the attached interest form and return it to Carolyn Pitts, Executive Assistant, by either mailing or dropping it off at the Health Center at 19270 Sonoma Highway, Sonoma, CA 95476 or by fax 707-939-9730, or email as a PDF attachment to cpitts@svchc.org.

Sincerely,

The Nominating Committee

**SONOMA VALLEY COMMUNITY HEALTH CENTER
BOARD INTEREST FORM**

I, _____, am interested in talking to you about being a potential Board member for Sonoma Valley Community Health Center. You may contact me by phone at _____ or by e-mail at _____ or by mail at _____

Patient of the Health Center? Yes _____ No _____
Live in City of Sonoma/Sonoma Valley? Yes _____ No _____
Work in City of Sonoma/Sonoma Valley? Yes _____ No _____

Race: _____ Ethnicity: _____

Print Name

Signature

Date

Send to: Board Nominating Committee
c/o Carolyn Pitts
19270 Sonoma Highway
Sonoma, CA 95476
Or fax to (707) 939-9730
Or e-mail to cpitts@svchc.org