



## Mission Statement

The 100 Black Men of New Jersey, Inc. is a non-profit corporation organized under the laws, rules and regulations of the State of New Jersey. Through mutual cooperation, joint planning and organized execution, its general purpose is to facilitate and enhance the educational, spiritual, economic and social mobility of the African American community within the State of New Jersey and to assist its members in civic and charitable endeavors. By fostering committed leadership through the principles of work, wisdom, and worth, the 100 Black Men of New Jersey, Inc. is an organization devoted to making a difference.

### Filing Instructions

1. One recent glossy 3 x 5 photograph and resume must be submitted with the application for membership. Any application filed without a photo and resume will not be processed. A professional quality electronic/digital photo is acceptable.
2. A \$100.00 non-refundable fee must be submitted with the application. Payment must be made in the form of a certified check or money order payable to: 100 Black Men of New Jersey, Inc.
3. All applicants must be sponsored by a member in good standing of the New Jersey Chapter. Sponsoring member must sign cover page of application.
4. Return completed applications to:  
Membership Chairman  
100 Black Men of New Jersey, Inc.  
C/O Jerrid Douglas  
3587 Highway 9, Unit 529  
Freehold, NJ 07728
5. Upon membership approval, an Initiation Fee of \$400.00 and Membership Dues of \$500.00 are due.

By signing this form, I certify that all information provided in this application is accurate and true. My signature authorizes the verification of all information by means of a background check. I understand that any material misstatements will be deemed grounds for rejection.

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Name of Applicant

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Signature of Applicant

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Date

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Name of Sponsor

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Signature of Sponsor

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Date

# 100 BLACK MEN OF NEW JERSEY, INC.

Membership Application



<b>APPLICANT INFORMATION</b>		
Last Name:	First:	M.I.:
Home Address:		Apartment #:
City:	State:	ZIP:
Home Phone:	E-mail Address:	
Cell Phone:	Home Fax:	Social Security No.:
Marital Status:	Anniversary:	Date of Birth:
Spouse:		Date of Birth:
Children:	Date of Birth:	Gender:
Children:	Date of Birth:	Gender:

<b>EDUCATION</b>		
High School:		Address:
From:	To:	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>
College:		Address:
From:	To:	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree:
Other:		Address:
From:	To:	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> Degree:

<b>PROFESSIONAL AND COMMUNITY AFFILIATIONS</b>	
Organization:	Position Held:
Organization:	Position Held:
Organization:	Position Held:
<b>EMPLOYMENT</b>	
Current Company:	Phone: ( )
Address:	Supervisor:
Job Title:	Industry:
Responsibilities:	
From:	To:
:	

Previous Company:		Phone: (    )
Address:		Supervisor:
Job Title:	Industry:	
Responsibilities:		
From:	To:	Reason for Leaving:
Previous Company:		Phone: (    )
Address:		Supervisor:
Job Title:	Industry:	
Responsibilities:		
From:	To:	Reason for Leaving:

<b>MILITARY SERVICE</b>		
Branch:	From:	To:
Rank at Discharge:	Type of Discharge:	
If other than honorable, explain:		

<b>GENERAL INFORMATION</b>
<p>What do you hope to gain from your affiliation with the 100 Black Men of New Jersey, Inc., a chapter of the 100 black Men of America, Inc.?</p> <p>What motivates you to seek membership in the New Jersey Chapter and what can you contribute to its goals and objectives?</p> <p>In your opinion, what are the three most pressing problems facing Black communities in New Jersey today?</p> <p>What is your most significant professional achievement?</p>
<b>SIGNATURE</b>
<p>By signing this form, I certify that all information provided in this application is accurate and true. I understand that the information provided will be verified and any material misstatements will be deemed grounds for rejection. I consent to a background check.</p> <p>Signature of Applicant: _____ Date: _____</p>