



APPLICATION TO BECOME A MEMBER OF THE BOARD OF DIRECTORS

Name: _____

Contact Information (HOME)

Address (H): _____
Telephone # (H): _____ E-Mail Address (H) _____
Cell Phone # (H): _____

Contact Information (WORK)

Address (W): _____
Telephone # (W): _____ E-Mail Address (W) _____
Cell Phone # (W): _____

Preferred Address for Contact: Work Home

Preferred Number for Contact: Work Cell (work) Home Cell (home)

1. In order to assist us in selecting Board Members who can best meet the present needs of Inspire Community Support Services, please provide us with the following information:

Do you reside in Cornwall or SD&G?

YES NO

If YES, where? _____

2. If applicable, please list your current occupation and the community in which you work below:

3) Please list any relevant experience, skills and/or special interests you feel would benefit the Board:

4. If you have any previous Board experience, please include the name of organization(s) you have served, your position and the dates you were involved:

5. Please indicate the areas which best describe your skills and circle the number that describes your level of competency for each one (1 = limited, 5 = excellent):

Policy Development
1 2 3 4 5

Human Resources
1 2 3 4 5

Strategic Planning
1 2 3 4 5

Social Action / Lobbying
1 2 3 4 5

Accounting / Finance
1 2 3 4 5

Public Relations / Marketing / Fundraising
1 2 3 4 5

Program Development & Evaluation
1 2 3 4 5

Community Development
1 2 3 4 5

Research / Evaluation
1 2 3 4 5

Any other skills (please specify below):
Project management – non-profit sector

6. Please tell us why you would like to become an Inspire Community Support Services Board Member:

7. How would you describe yourself? (<10 lines).

REFERENCES:

Please provide the names and contact information for two people persons who could provide a reference for you. Include name, occupation, address, email address and telephone number.

Name: _____ Phone: _____
Address: _____ E-Mail: _____
Occupation: _____

Name: _____ Phone: _____
Address: _____ E-Mail: _____
Occupation: _____

Signature of Applicant:

Date: _____

Received Date: _____

Thank you for your interest!

Forward completed application to:

Lisa Waldroff, Executive Director
lwaldroff@inspire-sdg.ca