Board Member Application Form

Name:_____

Address:_____

City:_____ Prov:_____ Postal Code:_____

Phone:_____ Email:_____

Date of Birth:_____ Profession:_____

Time Availability:_____

Please indicate your strengths:

- ☐ Board member experience
- ☐ Communication
- ☐ Marketing and promotion
- ☐ Networking
- ☐ Fundraising
- ☐ Technology
- ☐ Financial skills
- ☐ Leadership
- ☐ Recreation
- ☐ Risk management and audit
- ☐ Stakeholder management
- ☐ Public speaking
- ☐ Women's issues
- ☐ Other
- ☐ Business
- ☐ Community awareness
- ☐ Experience with Newcomers
- ☐ Experience with youth
- ☐ Strategic thinking
- ☐ Legal skills

List your relevant community experience and/or employment:_____

What have you learned from the above experiences?_____

What contributions do you feel you can make to the FilCanPros Network?_____

Why are you interested in serving as a board member of the FilCanPros Network?_____

What other board/committee/volunteer commitments do you currently have?_____

_____

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_____

Any other comments you wish to share?_____

_____

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_____ _____

Applicant signature Date

Please submit application either directly to a FCPN board member or Executive Members. You can also e-mail the completed application to filcanpros@gmail.com

Thank you for your interest in becoming a board member of FilCanPros Network. New Board members are elected at the Annual General Meeting held in March of each year; interim appointment may be made by the Board of Directors until the Annual General Meeting.

Office Use Only

Nominee has met with E
or another Board Member Date:_____

Nominee's application received by Board Recruitment
Committee Date:_____

Nominee attends a board meeting Date:_____

Action taken by board:_____

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