



Pacific Child and Family Enrichment Society

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1-888-480-CARE (2273)

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Email: sphillips@pacific-care.bc.ca

Board Member Application Form

Date available to begin commence Board duties _____

Specific position of interest:

(a) Executive: Chair, Vice Chair, Treasurer, Membership, Secretary

(b) or Member at Large: (six positions)

PERSONAL DATA

Last name: _____ Given name(s): _____

Address: _____

City: _____ Postal code: _____

Home tel: _____ Business tel: _____

Are you willing to travel as part of your Board duties? Yes No

Have you ever been convicted of a criminal offence for which a pardon has not been granted? Yes No

To determine your qualifications for board membership, please provide below and on the reverse, information related to your academic and other achievements including volunteer work, as well as employment history. Additional information may be attached on a separate sheet.

EDUCATION

SECONDARY SCHOOL

Highest grade or level completed _____

BUSINESS/TRADE SCHOOL

Name of program: _____ Length of program: _____

License, certificate or diploma awarded? Yes No

Type: _____

COMMUNITY COLLEGE

Major subject: _____ Name of program _____

Diploma or certificate awarded? Yes No

* All Board Members, Volunteers, Management and Staff are to have a satisfactory Criminal Record Check on file at time of entry and once every two years on the even years thereafter.

Type: _____

UNIVERSITY

Major subject: _____ Name of program _____

Degree, diploma, or certificate awarded? Yes No

Type: _____

Other courses, workshops, seminars:

WORK RELATED SKILLS

Describe any of your work related skills, experiences, or training that would be relevant to serving as a Board Member, e.g. fundraising experience:

EMPLOYMENT

Name of present or last employer: _____

Type of Business: _____ Telephone Number: _____

Job title: _____

Period of employment: From: _____ To: _____

Name of previous employer: _____

Type of Business: _____ Telephone Number: _____

Job title: _____ Salary: (optional) _____

Period of employment: From: _____ To: _____

For references may we approach:

your present or last employer? Yes No

your previous employer? Yes No

List references, if different than above on a separate sheet.

PAST BOARD EXPERIENCE

Name of present or last position: _____

Type of Business: _____ Telephone Number: _____

Period of service: From: _____ To: _____

I hereby apply to be a voluntary Board Member with Pacific Child and Family Enrichment Society. To the best of my knowledge the information on this application form is correct. I understand that a false statement may disqualify me from serving as a Board member, or cause my dismissal.

Signature: _____ Date: _____

Have you attached an additional sheet? Yes No