



Chebucto Connections Board of Directors Volunteer Application

Full Name: _____ Date: _____

Do you have specific areas within the board that you are interested in:

- Policy development
- Operations
- Fundraising
- Other _____

Do you currently live in Spryfield? Yes ____ No ____

If no, please explain your interest in the Spryfield Community or Chebucto Connections:

Personal Information

Mailing Address _____

City _____ Province _____ Postal Code _____

Phone Number _____ Email _____

Birthdate (Day/Month/Year) _____

Employment

Position/Title: _____

Current Employer: _____

Please list any groups, clubs, memberships you are currently apart of:

What experiences have you had that have prepared you to contribute as a Chebucto Connections board member?

Who should be contacted in case of emergency?

Name of person : _____ Relationship: _____

Phone number : _____

References

Please list three people who know you well and can attest to your character, skills and dependability. Include your current or last employer.

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

Please read the following before signing this application:

I understand that this is an application for volunteering as a board member and not a commitment or promise of employment. I also understand that as a board member I am not eligible to work for Chebucto Connections.

I certify that the information provided to Chebucto Connections is true, correct and complete to the best of my knowledge. I understand that information contained on my application will be verified by Chebucto Connections. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with Chebucto Connections or my termination as a volunteer.

Print name: _____

Signature: _____ Date: _____