



Board of Directors Application

I am interested in serving on the CSBD Board of Directors, serving Hastings, Prince Edward Counties, and Lennox and Addington. I understand the Executive Committee will consider names recommended to it and from those names present a slate for election to the Board of Directors.

Note: All information supplied will be confidential to the Executive Director and the Personnel Committee of the Board.

Name: _____ **D.O.B.:** _____

Address: _____
Street City Postal Code

Contact: _____
Home Cell Work

Email: _____ **Occupation:** _____

List previous Board experience and/or volunteer involvement:

Which areas of expertise do you feel you can bring to the Board?

What are your personal and/or professional strengths and characteristics that will make you an effective Board member?

Why are you interested in applying to become a director on the CSBD Board?

Yes No Do you currently provide professional services for an employee with direct or indirect business with CSBD?

Yes No Have you been an employee or client of CSBD within the past two (2) years?

Signature

Signature Date

Submit completed application to the CSBD address listed below or email to tammy.shires@csbd.on.ca

12 Moira Street East, Belleville, ON K8P 2R9
Tel: 613-966-7413 • Fax: 613-966-2357 • Toll Free: 1-800-966-7413
Email: csbd@csbd.on.ca • website: www.csbd.on.ca