

## Board of Directors Application

**\*All applicants for consideration must work or reside in the Halton Region or have a substantive interest in the Halton Region\***

### Contact Information:

Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City, Prov., Postal Code: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_

### Special Skills or Qualifications:

*Highest Level of Education:*

- High School
- College
- University Undergraduate
- University Post Graduate

*Name of educational institution from which you received your highest degree/diploma:*

*Certificate/Diploma/Degree:*

*Area of Study:*

*Summarize special skills and qualifications you have acquired from employment, previous volunteer experience, or through other activities, including hobbies and sports:*

*Please check the education or skills you will contribute to the board:*

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Accounting/financial | <input type="checkbox"/> Management          | <input type="checkbox"/> Public Relations   |
| <input type="checkbox"/> Investment           | <input type="checkbox"/> Marketing           | <input type="checkbox"/> Fundraising        |
| <input type="checkbox"/> Special Events       | <input type="checkbox"/> Community Relations | <input type="checkbox"/> Lobbying           |
| <input type="checkbox"/> Education            | <input type="checkbox"/> Training            | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Public Speaking      | Other: _____                                 |   |

**Interests:**

*Tell us why you want to be a Board Member for Crime Stoppers of Halton:*

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**Previous Volunteer Experience:**

*Summarize your previous volunteer experience:*

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**Person to Notify in Case of Emergency:**

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, Prov., Postal Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_

*By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.*

Name (printed): \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**Our Policy:**

*It is the policy of this organization to provide equal opportunities without regard to race, colour, religion, national origin, gender, sexual preference, age, or disability.*

*Thank you for completing this application form and for your interest in volunteering with us.*

*Signing of this form is authorization for the Police to conduct a Criminal Records Check:*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_