

Board of Directors Candidate Application

Contact person for all inquiries:
Ian Tate, Commodore South Niagara Canoe Club
admin@southniagaracanoeclub.ca

Please return this application to the above email address no later than 3 days prior to the Annual General Meeting

Date						
Name						
	•					
RESIDENCE						
Address						
Phone						
Email						
EMPLOYER						
Name of Organization						
Your Title		Title				
Type of Business/Organization						
Primary Service Type		vice Type				
Years with Organization						
	D. E.					
PLEASE list boards and committees that you serve or have served on:						
Organiza	ation					
Role/T						
Date of S						
Date of S	ervice					
Organiza	ation					
Organization Role/Title						
Date of Service						

EDUCATION/TRAINING/CERTIFICATES:		
OPTIONAL-Have you received any awards/honours that you would like to mention?		
How do you feel South Niagara Canoe Club would benefit from your involvement on the board?		

SKILLS/EXPERIENCE/INTERESTS please indicate all that apply to you:

Finance/Accounting	
Personnel/HR	
Administration/management	
Non-profit experience	
Community Service	
Policy Development	
Program Evaluation	
Public	
Relations/Communication	
Education/Instruction	
Special Events	
Grant Writing	
Fundraising	
OTHER	
OTHER	
OTHER	

NOMINATION-All applications for consideration on the board of SNCC must be accompanied by an endorsement from 2 other SNCC members in good standing. My application for membership on the board of SNCC is endorsed by:

Name				
Address				
Phone				
Email				
Name				
Address				
Phone				
Email				
ADDITIONAL-Please tell us anything else about yourself that you would like to share:				

Thank you very much for applying