



Inspiring all girls to be strong, smart, and bold

## Board of Directors Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: H: \_\_\_\_\_ B: \_\_\_\_\_

C: \_\_\_\_\_ F: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer Name & Business Address (if applicable): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Current Profession/Job Title: \_\_\_\_\_

Please provide a brief description of present responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of Post-Secondary Education/ Professional Credentials (if applicable).  
Please include school name, program of enrollment and completion status for all relevant education:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special interests and hobbies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**How / from whom did you hear about Girls Incorporated of York Region?**

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**How do you think you can contribute to the Board of Directors at Girls Incorporated of York Region? (Expertise, business / personal contacts, hobbies, interests etc.)**

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**Previous and current community involvement or experience with volunteer boards/ committees – *board memberships, volunteer work, church involvement etc.* :**

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**The board commitment requested is for a three-year term, generally meeting once a month. Additional involvement and attendance at agency events is encouraged. At this point in time do you feel you can make this commitment?**

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**What are your personal goals as a member of the Board of Directors?**

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

References (3)

Please provide contact information for people that can speak to your suitability as a Board of Directors member. Please do not include family members.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

**Thank you for your interest and time in completing this information. Once the completed applicant profile has been received and reviewed, we will contact you in order to arrange a personal interview.**

**Please return completed application by;**

**Fax:** 905-830-4480

**E mail:** [lyn@girlsincyork.org](mailto:lyn@girlsincyork.org)

**Mail:** 460 Davis Dr.  
Newmarket, Ont. L3Y 0C4