

Big Brothers Big Sisters Grey Bruce - Board of Directors (BoD) Application Form

Thank you for considering becoming a member of our Board of Directors! Our Executive Committee will address your application shortly and we will be in touch immediately thereafter. Note that all application information provided is treated as confidential.

Name:	Address:	
Occupation:		
Work Phone:	Email:	
Home Phone:	Cell Phone:	
Please check if you have an	y experience work or personal in any of	f the following areas:
Volunteer Work:	Human Resources:	Marketing:
Fund Raising:	Public Relations:	Finances:
Policy Writing:	Social Media/IT: Co	ommunications:
Strategic Planning:	Graphic Design:	Leadership:
Grant Writing:	Government Relations:	
Corporate Liaison:	Legal Support:	Program Support
Please provide a brief descr	iption of the experience(s) you checked	d above.
Please provide any current o	or experience as a member of a Board	of Directors.



Sisters Board of Directors.	
PEEEDENCES	
	ee (3) references, only one of which may be a family member.
Please provide a minimum of thro	
Please provide a minimum of thro 1) Name: Address:	
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Please provide a minimum of thro 1) Name: Address: Primary Contact Phone:	Secondary Contact Phone:
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Please note that due to our Agency's close involvement with children, it is our policy that all Board Member Applications undergo a screening process that includes a police check before you are accepted as a Board Member. This policy is for the protection of our Little Brothers and Little Sisters and we ask for your understanding and cooperation in this matter.

Please Contact: Big Brothers Big Sisters of Grey Bruce, (519-376-4449), (ed.greybruce@bigbrothersbigsisters.ca), if you have any questions or to drop off this application. Thank You.