

Board Membership Application

Date:				
Name:				
Home Phone #:		Cell #:		
E-mail:				
Address:				
Birth Date:				
Current employme	nt situation: (full time	e/part-time/retired/other):		
Availability:				
Weekdays	Weekends	Evenings -		
Online Access (high	speed internet?) 🗆			
Why are you interested in our organization?				

Please check off any skills or experience that you currently possess in the following areas, or are interested in learning about or training in:

Skill or Expertise	Currently Have	Interested in Learning
Strategic Planning		
Fundraising or Grant Writing		
Finance		
Program or Community Development		
Human Resources		
Bylaw & Policy		
Non-Profit Membership		
Google (Hangouts, Docs, Sheets, gmail)		

Do you currently serve on other Boards, or do you have previous Board experience? Yes O No O					
When?					
Where?					

Area(s) of expertise/contribution you feel you can make:

Other volunteer commitments:

Thank you for completing this application for board membership. Please email with your resume to director@dvcommunitylearning.ca Our team will review your application and get back to you!