

Thank you for your interest in joining the Board of Directors with reStart. Our Board of Directors play a vital role in promoting our vision and increasing awareness of our services in our community. Please review the documents included in this Application Pack and complete the application form in full. Your application will be reviewed by the Board Chair and Executive Director and will be communicated to other Board Members as part of the application process.

Personal Details		
Mr / Mrs / Miss / Ms.	First Name:	Last Name:
Address:		
City:	Postal Code:	Province:
Cell Phone #:	Home #:	
Email Address:		
Professional Information		
Employment status: <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Employed <input type="checkbox"/> Retired		
Current / Previous Job Title:		
Please briefly describe your professional background and experience that is relevant to this Board position:		
Please list your volunteer experience including timeline:		
General Questions		
What motivates you to become a member of the reStart Board of Directors?		

<p>Please briefly outline the specific contributions you hope to make to the reStart Board:</p>			
<p>The Board of Directors seeks a complementary balance of knowledge, skills and experience at a Governance Level. Please identify those areas in which you have basic or advanced competencies and areas you are interested in:</p>			
<b>Board of Governance</b>	<b>Basic</b>	<b>Advance</b>	<b>Interested</b>
- Business Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Community Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Education /Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Finance / Accounting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Governance and Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Human Resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Fundraising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Government / Political Acumen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Administration / Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Event Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Legal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Public Relations / Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Quality / Risk Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Strategic Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>If selected as a Board member, which committee(s) would you like to join?</p> <p style="text-align: center;">             Finance <input type="checkbox"/>                Fundraising <input type="checkbox"/>                Nominating <input type="checkbox"/>                Governance <input type="checkbox"/>                Program <input type="checkbox"/>                Marketing <input type="checkbox"/> </p>			
<p>As you read the expectations in the Board Roles and Responsibilities, do you think you will face any challenges making these commitments?</p>			

REFERENCES			
Please provide two references that are familiar with your previous board or committee experience:			
1 <sup>st</sup> Reference		2 <sup>nd</sup> Reference	
Relationship		Relationship	
Telephone		Telephone	
Email		Email	

Please attach a current resume to your application.

**By submitting this application and a resume, I declare that:**

- I meet the eligibility criteria and accept the conditions of nomination as delineated.
- I certify that the information in this application and in my resume is accurate and true.
- If selected, as a Board Member, I agree to serving on the reStart Board for three (3) years and attend all bi-monthly Board meetings in a year.
- If selected, as a Board Member, I agree to financially support reStart as a monthly donor.

**Name of Applicant:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_