



## Foundation

### Volunteer Board Member Application Form

(Please Print)

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

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

Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home: (\_\_\_\_) \_\_\_\_\_ Cellular: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

Briefly state your reasons and interest in applying for appointment to the Chatham-Kent Integrated Children's Service Foundation Board:

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What is your background/qualifications/experience/expertise that is relevant to this organization? (please include relevant resume information):

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What do you hope to contribute by your participation?

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Are you willing to commit to a maximum of 5 hours per month in meeting time and preparation?

Yes\_\_\_\_/No\_\_\_\_

Signature: \_\_\_\_\_

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

Submit completed application to the attention of: **CKCS Foundation** at the address below

495 Grand Avenue, West  
Chatham, Ontario  
N7L 1C5  
Phone: (519) 352-0440  
Fax: (519) 352-4152