

## WINNIPEG HOUSING REHABILITATION CORPORATION BOARD OF DIRECTORS APPLICATION FORM

First name:	Last name:		
Address:	City:		
Province:	Postal Code:		
Daytime phone:	Cellular phone:		
E-mail address:			
Eligibility criteria for the Board of Directors			
I am at least 18 years old	Yes	No 🗀	
I am willing to sign confidentiality and privacy clauses	Yes	No 🗔	
I can commit to a three-year service term	Yes	No 🗀	
I commit to full participation at Board/Committee meetings	Yes	No 🗀	
Application/Nomination Form			
<b>Note</b> : Areas marked with an (*) do not need to be completed if If you are not submitting a resume, all fields must be completed		ume containin	g this information.
Current place of employment and Position*			
Employment Background*			
Employment Background			
Community/Committee Involvement*			

Area(s) of Expertise				
Special Interests/Life Experiences				
•				
Request consideration for the follow	ing Agencies, Boards and Commissions*			
Troquest sometanent for the following	mg/lgonoloo, Dourdo and Commodicine			
Please include three references (Pre	vious referenced are not kept on file and must	he resubmitted)		
Optional: You may also choose to inclu	de letter(s) of reference with this application.	be resubilitied).		
Name of Reference	Telephone No.	Email Address		
Name of Reference	relephone No.	Liliali Address		
	'224			
Additional Comments (Including disability accommodation requests)				
You are available for meetings on:				
□ Weekdays □ Weekday lunc	h hours 🗀 Evenings 🗀 Week	ends		

Please check the Board committees and activities that you would be interested in participating in:					
Board of Directors	Executive/Governance Committee				
Audit/Finance Committee	HR Committee	Building Committee			
I hereby certify that the information contained in this application form is accurate and complete.					
Signature:					
(by printing your name, you are signing this electronically)					
Date:					
Submitted/Nominated by		Date			

To submit the application electronically please save a copy and email it to <a href="info@whrc.ca">info@whrc.ca</a> (attention nominations Committee). A member of the Nominations Committee will be in touch with you within 5 business days to discuss your application.

## PAPER COPIES OF THE APPLICATION SHOULD BE MAILED TO:

Nominations Committee – WHRC 60 Frances Street, Winnipeg, MB R3A 1B5

The personal information contained in this application will be used to assess your eligibility to serve as a member of the Winnipeg Housing Rehabilitation Corporation Board of Directors. It will be stored and deposed of according to the privacy policy of WHRC.