

# Application for Board of Directors



## Contact Information

Name	
Street Address	
City, Province, Postal Code	
Home Phone	
Work/Cell Phone	
E-Mail Address	

*Please attach additional pages if necessary.*

## General

Why do you feel that EWCS is an important part of our community?

## Skills/Experience

What do you feel you can contribute as a member of EWCS's Board of Directors? Please list your qualifications, skills and prior volunteer experience.

### Interests/Hobbies

Tell us a little about your interests and hobbies.

### Additional Information

Please use this space to include any other information you feel is relevant to your application.

### References (Please provide two references)

Name		
Company		
Street Address		
City , Province, Postal Code		
Home Phone		
Work Phone		
E-Mail Address		

**Completed application forms must be received by EWCS by mail at 45 Main Street, Erin, Ontario N0B 1T0, or by fax to: (519) 833-7563, or by email to [kari.s@ew-cs.com](mailto:kari.s@ew-cs.com)**

*Applicants will be contacted by phone or email for initial screening.*

Thank you for completing this application form and for your interest in volunteering with us.