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|  | Gifted Children’s Association of British Columbia |

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| APPLICANT CONTACT INFORMATION |
| NAME |  | HONORIFIC |  |
| ADDRESS |  | CITY, POSTAL CODE |  |
| BIRTHDATE |  | TELEPHONE |  |
| EMAIL |  |

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| What motivates you to become a board member for the Gifted Children’s Association of BC? |  |
| Describe your education history. |  |
| Describe your employment experience. |  |
| What previous and current board experience do you have? |  |
| Describe any previous and current community involvement and volunteer experience. |  |
| What special qualifications and/or skills would you bring to the board? |  |

***Thank you for your interest in joining our Board of Directors. Our Board Directors play a vital role in promoting our vision and increasing gifted awareness within our community. We welcome individual applicants with suitable skills and experience to help us grow our services in this community.***