

VOLUNTEER BOARD MEMBER APPLICATION FORM

Villa Colombo Toronto Auxiliary (VCTA)



The VCTA Board's mission is to support Villa Colombo Homes for the Aged (Toronto) and to improve the lives of our seniors through fundraising and community/family involvement.

The VCTA Board is comprised of up to 18 Directors. Directors serve as volunteers without remuneration (a Director may be paid or reimbursed for reasonable expenses incurred by him or her in the performance of his or her duties as Director). Regular meetings of the Board are held on the first Tuesday of the month. Each Director is expected to attend all Board Meetings and participate in the planning and execution of at least one fundraising initiative per year.

Applications are being accepted from interested members of the community to fill vacancies as they arise. Please complete the following application for consideration by the Villa Colombo Toronto Board of Governors. The Board of Governors will only consider information on the application form. The VCTA will require that all potential candidates have a police reference check performed if selected.

Please submit your completed application form by end of day on **Friday, August 13, 2021** (preferably via email):

Villa Colombo Homes for the Aged

Attn: Villa Colombo Toronto Auxiliary (VCTA)

40 Playfair Avenue, Toronto, ON M6B 2P9

Email: vcia@villacolombo.on.ca

Note: If you have any questions, please contact us via email at vcia@villacolombo.on.ca. Applicants will be notified after selections to fill vacant positions have been made.

APPLICANT INFORMATION

First Name:		Last Name:	
Street Address:			Apartment/Unit #:
City:		Province:	
Home Phone:		Mobile Phone:	
Email Address:			

INTEREST AND MOTIVATION FOR SERVING

Please provide your interest and motivation for wanting to serve on the Villa Colombo Toronto Auxiliary Board, and summarize any experience that will support your ability to serve effectively as a member.

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COMMUNITY INVOLVEMENT

Please describe your last two community positions and indicate the skills used.

Position:		Organization:		From/To (MM/YYYY):	
Position:		Organization:		From/To (MM/YYYY):	
Skills:	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Sales <input type="checkbox"/> Accounting/Bookkeeping <input type="checkbox"/> Fundraising <input type="checkbox"/> Writing / Communication <input type="checkbox"/> Event Planning <input type="checkbox"/> Education <input type="checkbox"/> Technology / Computing <input type="checkbox"/> Not For Profit <input type="checkbox"/> Arts </div> <div style="width: 30%;"> <input type="checkbox"/> Legal <input type="checkbox"/> Health/Medical <input type="checkbox"/> Restaurants/Food Services <input type="checkbox"/> Marketing <input type="checkbox"/> Social Media <input type="checkbox"/> Government Relations <input type="checkbox"/> Community Organizing <input type="checkbox"/> Coaching </div> <div style="width: 30%;"> <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ </div> </div>				

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EDUCATIONAL BACKGROUND

Please indicate the institution attended, degree or credentials attained, and year of completion.

High School:		Degree:		Completed (YYYY):	
College/University:		Degree:		Completed (YYYY):	
Post-Graduate:		Degree:		Completed (YYYY):	

EMPLOYMENT STATUS

Please indicate your current employment status.

Status:	<input type="checkbox"/> Employed (Full Time or Part Time) <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired	<input type="checkbox"/> Student <input type="checkbox"/> Not Working <input type="checkbox"/> Other
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PROFESSIONAL BACKGROUND

Please describe your last two employment positions and indicate the skills used.

Position:		Organization:		From/To (MM/YYYY):	
Position:		Organization:		From/To (MM/YYYY):	
Skills:	<input type="checkbox"/> Sales <input type="checkbox"/> Accounting/Bookkeeping <input type="checkbox"/> Fundraising <input type="checkbox"/> Writing / Communication <input type="checkbox"/> Event Planning <input type="checkbox"/> Education <input type="checkbox"/> Technology / Computing <input type="checkbox"/> Not For Profit <input type="checkbox"/> Arts	<input type="checkbox"/> Legal <input type="checkbox"/> Health/Medical <input type="checkbox"/> Restaurants/Food Services <input type="checkbox"/> Marketing <input type="checkbox"/> Social Media <input type="checkbox"/> Government Relations <input type="checkbox"/> Community Organizing <input type="checkbox"/> Coaching	<input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____		

PROFESSIONAL, NOT-FOR-PROFIT, OR OTHER MEMBERSHIPS [IF APPLICABLE]

Please include current or past memberships in professional, not-for-profit, or social groups, your position, and the dates you were involved.

Position:		Organization:		From/To (MM/YYYY):	
Position:		Organization:		From/To (MM/YYYY):	
Position:		Organization:		From/To (MM/YYYY):	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

The personal information requested on this application form is being collected and used by Villa Colombo Toronto to evaluate the suitability of all potential candidates for nomination to the Board of Directors of VCTA. The qualifications of an intended Director are subject to a review by the Board of Governors. Additional information about you may also be collected from the organizations you have provided and used to evaluate your suitability as a candidate, as well as to verify the truth and accuracy of the information you have provided, and for no other purpose. This information will not be disclosed except as required for the above-noted purposes. For any questions about the collection, use, or disclosure of personal information requested on this form, please see Villa Colombo's Privacy Policy.

Signature:		Date:	
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