

**Application Board of Directors**

Applicant's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

How long have you resided in Richmond County? \_\_\_\_\_

What skills will you bring to the Committee/Board? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of related business/work experience in the last three (3) years \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Academic history/experience \_\_\_\_\_

\_\_\_\_\_

Community involvement and/or volunteer activities in the last three (3) years \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date of Application \_\_\_\_\_

Where did you hear about the committee/board vacancies? \_\_\_\_\_

Your personal information is collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act*. If you have any questions about the collection and use of this information, please contact Sherry Sampson, Managing Director, Dr. Kingston Memorial Community Health Centre, 40 School Rd, L'Ardoise, NS (902) 587-2800 ext. 3.



**Dr. Kingston Memorial  
Community Health Centre**