

Board of Directors Expression of Interest Application Form



Thank you for your interest in joining the Learning Through Loss Board of Directors!

[Please click here to learn more about us, our mission, values and vision.](#)

Please use this form to provide useful information about yourself to ensure the best match between you and the Learning Through Loss Board of Directors. The following information will be shared with our current Board and Executive Director to help inform your nomination.

First/Last Name: _____

Mobile Phone Number: _____

Email address: _____

Briefly describe why you would like to join our Board of Directors:

Your Professional Role: _____

Your Employer: _____

Your current and past non-profit organizational affiliations:

Organization Name	Role	Dates

Which of your skills would you like to utilize on the Board? Check all that apply:

- | | | |
|---|---|---|
| <input type="checkbox"/> Board Development | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Program Development |
| <input type="checkbox"/> Governance Support | <input type="checkbox"/> Communications/Marketing | <input type="checkbox"/> Training |
| <input type="checkbox"/> Staffing / HR | <input type="checkbox"/> Community Networking | <input type="checkbox"/> Volunteer Management |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Event Coordination | <input type="checkbox"/> Counselling Peer Support |
| <input type="checkbox"/> Legal Expertise | <input type="checkbox"/> Venue/Facility Support | |

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Other skill(s) you'd like to utilize?

What would you like to get for yourself out of your participation on the Board, e.g., what types of experiences, skills to develop, interests to cultivate for you, etc.?

If you join the Board, you agree that you can provide at least 2-4 hours a month in attendance to Board and Committee meetings, and that you do not have any conflict-of-interest in participating on the Board.

Your signature: _____ Date: _____

If you are not selected as a member of the Board, or if you decide not to join, would you like to [donate](#) or volunteer to assist our organization in various ways that match your skills and interests?

☐ Yes

☐ No

☐ Perhaps