

BOARD OF DIRECTORS APPLICATION FORM

*Please complete and submit this form <u>with</u> cover letter and resume; reference callout for specific requirements.

Personal Information (please p	rint or type)			
Name (pronouns)				
Address				
City / Province				
Postal Code				
Telephone (home)				
Telephone (business)				
Fax				
E-Mail				
Board Experience (Please only	y fill out if you hav	ve previo	us board experience)	
Position	Details		Organization name	Period
LEAF strives for demographic objective by completing the	following:	Branch Yes (X)	representation on its committees and board	I. Please help us achieve th
I am a member of / affiliated with a LEAF Branch		Which branch?		
I am / have been a LEAF / Branch volunteer		Please specify in what capacity:		
I am a member of an equity-deserving group		Please identify (optional):		
I am fluent in French or another language		Please specify language(s):		
I have an area of legal expertise/ am currently pursuing legal education		Please specify:		
		Г	rease specify:	
currently pursuing legal educa	Directors positio	on, I agre ve permis	e to become a member of the geographically ssion to LEAF to share my contact information	
If selected for the Board of already, a nominal fee may	Directors positio	on, I agre ve permis	e to become a member of the geographically ssion to LEAF to share my contact information	