

Northern Ontario Families of Children with Cancer

Founded in the North for Families of the North

Registered Charity No. 86467 6713-RR 0001

NOFCC is not funded by the government and relies solely on donations and fundraising events.

All monies raised help families living in Northern Ontario who have a child diagnosed with cancer.

Board of Directors Candidate Application

Date:	Nominated by:		
Personal Contact Information			
Name:			
Salutation First	Last		
Address:			
Phone:	E-mail:		
Employer Information (Please provid	de a resume)		
Current:			
Your Title:			
Address:			
Phone:	E-mail:		
Type of Business or Organization:			
Preferred Method of Contact: ()	work () home () email		
Please list boards and committees that you have served on in the past or are currently serving on:			
Organization	Role/Title	Duration	

Education/Training/Certificates:
Have you received any awards or honours that you'd like to mention?
How do you feel that NOFCC would benefit from your involvement on the Board of Directors?

Skills, experience and interests: (Please check all the apply)

() Finance, accounting	() Education, instruction
() Personnel, Human Resources() Administration, management	() Special Event Planning() Grant writing, funding requests
() Non-profit experience	() Fundraising
() Community Service	() Outreach, advocacy
() Policy Development	() Volunteer Management
() Program Evaluation	() Other:
() Public Relations, communications	() Other:
Please list any groups, organizations or busine	esses that you could serve as a liaison to on behalf of
NOFCC.	
Please tell us anything else you would like to sl	nare about yourself:
THANK YOU VERY MUCH FOR APPLYING, WE	WILL BE IN TOUCH WITHIN A 4 WEEK PERIOD.
For Board Use:	
() Candidate has received recruitment pac	·
	vith board chair/board memberDATE
	DATE
() Candidate attended a board meeting	DATE