



APPLICATION FOR MEMBERSHIP

The following information will be used by the Selection Committee to assess individual candidates for membership. Personal interviews will be conducted with the finalists prior to a place being offered in the program.

GENERAL INFORMATION

Name:

Title/Position:

Organization:

Address:

Phone:

Fax:

Email:

Website:

Home Address:

Home Phone:

Cellular Phone:

ORGANIZATIONAL INFORMATION

Founding Date:

Annual Budget:

Number of Paid Employees:

Number of Volunteers:

Total Membership (if applicable):

Size of Board:

Board Chair:

ORGANIZATIONAL ACTIVITY

Please describe your organization's mission:

Please describe your program/services/activities:

Please describe your organizational structure, including your responsibilities and reporting relationships:

PERSONAL/PROFESSIONAL INFORMATION

Please list your work experience beginning with the most recent position:

Name	Title/Position	Dates
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Please indicate any other major current and past professional activities (i.e. board memberships, etc.)

Please list your educational accomplishments including institutions attended, degrees granted and dates as well as other significant professional development experiences.

PROGRAM OBJECTIVES

The Selection Committee pays special attention to these responses.

What particular challenge/opportunity of strategic importance to your organization would you like to address in the XD Cohort (peer consultation) portion of the program?

What is the issue?

What are your initial thoughts on the above?

What are your overall goals in participating in this program? You may consider both your organizations and your own professional development.

APPLICANT

I understand that **Executive Directions** is a two year program with a full day session (XD Cohort) and a 90 minute coaching session (XD Face to Face) each month. I commit to participate fully both for my own growth and for the development of my fellow members.

Signature:

Date:

FEES AND SPONSORSHIP

All candidates for **Executive Directions** must be nominated and sponsored by their organizations. The sponsor assumes responsibility for payment of the fee of \$3,000.00 per year. (Limited bursary money is available to offset a portion of this fee for needy organizations.) This section should be signed by the Board Chair (or designate) indicating that, if selected, the applicant will be expected to participate fully in the program and its components.

Sponsor Signature:

Sponsor Name:

Title:

Date: