

## Submitting Your Application

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**If you are interested in applying to be a board member, please submit:**

- a completed Application Attachment\*;
  - a current resume; and
  - contact information for three references from community members.
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**\* The Application Attachment is included on the following pages.**

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**Applications can be submitted by mail, fax or e-mail as indicated below:**

**Governance Services Branch  
Alberta Children and Youth Services  
3<sup>rd</sup> Floor, Sterling Place  
9940 - 106 Street NW  
Edmonton, Alberta  
T5K 2N2**

**Fax: 780-644-6880  
E-mail: [cys-cfsaboard.recruitment@gov.ab.ca](mailto:cys-cfsaboard.recruitment@gov.ab.ca)**

*Thank you for your interest in becoming a board member. All applications will be reviewed to determine which candidates best meet the needs of the position(s). Only individuals selected for an interview will be contacted.*

**Instructions:** To complete this form press ‘Tab’ to move to the next field.

The personal information requested in this application is required to determine the eligibility and suitability of nominees for Child and Family Services Authority board membership and will be used to screen nominations for appointment. Your personal information is collected under the authority of the *Child and Family Services Authorities Act*, and is managed in accordance with the *Freedom of Information and Protection of Privacy Act*. If you have any questions about this collection, please contact Board Resources and Development at 780-422-5679.

**PART A - Please provide the following information.**

For which region are you applying?

Please indicate how you found out about this opportunity:

- Newspaper
  Internet
  Community meeting  
 Word of mouth (specify):  
 Other (specify):

**PART B - The following statements must apply to you; please confirm by checking the boxes.**

- I am 18 years of age or older.  
 I am a Canadian citizen or a landed immigrant.  
 I am a resident in the region for which I am applying.  
 I have attached my resume.  
 I have attached contact information for three references from the community.

**Self-Identification (optional):**

- I am Aboriginal.
  I am not Aboriginal.

**PART C - Contact Information**

Name (as indicated on driver’s license)		E-Mail	
Home Telephone Number		Cell Telephone Number	
Street			
City		Province	Postal Code
Place of Residence (if different than mailing address)			

**PART D - Please provide your answers to the following questions.**

Describe your related experience, including experience with children and families, boards and committees, and community involvement.

Explain why you would like to serve as a member of the CFSA board and describe your interest in the services and programs for children and families.

Describe any other information regarding your suitability for membership on the board.