

Young Leaders on Board Program Community Leaders on Board Program

Non-Profit Organization Application

This application will be shared with Young Leaders on Board/Community Leaders on Board volunteers, administrator(s) and prospective board interns.

Organizations must meet minimum requirements in order to participate in the Young Leaders on Board or Community Leaders on Board Program. Please indicate if your organization:

- is an incorporated non-profit organization
- has a mission
- has by-laws and operational policies
- has conflict of interest and confidentiality policies
- has Directors and Officers liability insurance
- has general insurance
- holds monthly board meetings
- meets all legal requirements

1. Contact Information

Name of Organization	
Address	
Phone	
Fax	
Website	
Contact Person	
Position in Organization	
Email	

2. In which language are board meetings conducted? English French

3. Board meetings are held:
 a) Day/Date (e.g. Second Tuesday of each month) _____
 b) Time (e.g. 5 – 7 p.m.) _____
 c) Location (address) _____

4. Is the location of your board meetings wheelchair-accessible? _____

5. Please indicate the program(s) that your organization is willing to support

Young Leader on Board participant only (aged 18 to 29)	
Community Leader on Board participant only (aged 30 +)	
Young Leader or Community Leader (any adult)	

6. Please provide a brief description of your mandate.

7. Do you currently have youth representation on your board (18-29)? _____

8. We will do our best to ensure that the best possible match is made between boards and interns. Please specify what you are looking for in an intern:

Experience:

Education/Training

Other:

9. Can we use your organization's name when promoting the program? YES NO

If selected, your board will be expected to provide a mentor:

- To help the young leader adjust to their new role**
- To orient the intern to the organization**
- To introduce the intern to fellow board members**
- To provide background information**
- To answer questions that interns ask**

In our ongoing efforts to make these valuable Programs sustainable, we will be invoicing participating organizations (that are matched with an intern) \$50.00 in the spring of 2010. This will help to offset costs for materials, but payment is optional. We would appreciate your support for the Program.

TO ENSURE THAT THE MATCHING AND ORIENTATION PROCESS HAPPENS AS QUICKLY AND EFFICIENTLY AS POSSIBLE, WE ASK YOU TO PROVIDE, WITH THIS APPLICATION, A COPY OF ANY INFORMATION ABOUT YOUR ORGANIZATION THAT WILL BE HELPFUL AND RELEVANT, SUCH AS BROCHURES, ANNUAL REPORTS, JOB DESCRIPTIONS, BOARD ORIENTATION MANUAL, AUDITED STATEMENTS, ETC.

Signature: _____ Date: _____

Name: _____

Position: _____

PLEASE COMPLETE AND RETURN THIS APPLICATION, ALONG WITH ADDITIONAL INFORMATION, BY AUGUST 15, 2009 TO:

LINDA DUPUIS, COMMUNITY INITIATIVES MANAGER

PHONE: 560-3330 ext 222

FAX: 560-3337

EMAIL: programs@unitedwaysudbury.com



**United Way
Centraide**
Sudbury and/et District