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**WRSPC Board of Directors Member Application Form**

The Waterloo Region Suicide Prevention Council (WRSPC) is a non-profit, community-based organization, established in 1997. Our mission is to reduce suicidal behavior and its impact on individuals, families and communities. We believe that every person has the right to be supported in living a healthy positive life.

The purpose of WRSPC is to:

* Build a suicide safer community by applying a strengths-based approach focusing on wellbeing and resiliency.
* Engage the voices of those with lived experience of suicide in order to increase understanding of suicide and effective suicide prevention responses.
* Engage individuals, families and organizations to increase their participation in suicide prevention, intervention and postvention – hope, help, and healing.
* Focus on four key pillars: Community Awareness, Partnership & Capacity Building, Training & Education and Research & Evaluation.

**Personal Information**

The Waterloo Region Suicide Prevention Council will not use these details to add you to our mailing list, and the information will not be shared with anyone.

**Name**

First: Click or tap here to enter text. Last: Click or tap here to enter text.

**Address**

Street Address: Click or tap here to enter text.

Address Line 2: Click or tap here to enter text.

City: Click or tap here to enter text. Province: Click or tap here to enter text.

Postal Code: Click or tap here to enter text. Country: Click or tap here to enter text.

**Contact**

E-Mail Address: Click or tap here to enter text.

Phone Number Click or tap here to enter text.

Today's Date Click or tap to enter a date.

**Relevant Experience**

Please provide concise responses to the following questions.

**Please briefly tell us about yourself and why you would like to serve on the WRSPC Board of Directors:**

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| --- |
| Click or tap here to enter text. |

**Please briefly outline your work experience:**

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| --- |
| Click or tap here to enter text. |

**Please briefly outline your previous Board experience (if applicable):**

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| --- |
| Click or tap here to enter text. |

**Please outline your volunteer involvements (with other non-profit or charitable organizations, community committees, etc.):**

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| --- |
| Click or tap here to enter text. |

**What skills do you have that would be an asset to WRSPC?**

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| --- |
| Click or tap here to enter text. |

**What do the WRSPC values (outlined in the purpose statement above) mean to you?**

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| --- |
| Click or tap here to enter text. |

**Describe your familiarity with the work of the WRSPC:**

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| --- |
| Click or tap here to enter text. |

**References**

Please Provide at least two professional or personal references.

**Reference #1:**

First Name Click or tap here to enter text. Last Name Click or tap here to enter text.

Relationship Click or tap here to enter text.

Street Address Click or tap here to enter text.

Address Line 2 Click or tap here to enter text.

City Click or tap here to enter text. Province Click or tap here to enter text.

Postal Code Click or tap here to enter text. Country Click or tap here to enter text.

Phone Number Click or tap here to enter text.

**Reference #2:**

First Name Click or tap here to enter text. Last Name Click or tap here to enter text.

Relationship Click or tap here to enter text.

Street Address Click or tap here to enter text.

Address Line 2 Click or tap here to enter text.

City Click or tap here to enter text. Province Click or tap here to enter text.

Postal Code Click or tap here to enter text. Country Click or tap here to enter text.

Phone Number Click or tap here to enter text.

**Reference #3 (optional):**

First Name Click or tap here to enter text. Last Name Click or tap here to enter text.

Relationship Click or tap here to enter text.

Street Address Click or tap here to enter text.

Address Line 2 Click or tap here to enter text.

City Click or tap here to enter text. Province Click or tap here to enter text.

Postal Code Click or tap here to enter text. Country Click or tap here to enter text.

Phone Number Click or tap here to enter text.

**Submit application, in confidence, no later than 4:00pm on Tuesday, July 9th, 2019 to:** **wrspc@lutherwood.ca**

**If you require accommodation for submitting your application, please contact Elisa Brewer-Singh at ebrewersingh@lutherwood.ca or by calling 519-707-1958 ext. 2151.**