

Peninsula Consumer Services Co-operative Application for Directorship



Please attach your résumé.

Name	
Peninsula Co-op membership number	
Address	
Length of time at this address	
Phone - home	
Phone - mobile	
Email	

Have you been employed by Peninsula Co-op in the past? _____

Have you served on, or applied for the Peninsula Co-op Board of Directors in the past? _____

Please list any other co-operative organization you have been affiliated with as a member, employee or director.

Organization	
Type of affiliation (member, board, etc.)	
Dates	

Please list any relatives who are past or present Peninsula Co-op employees

Name		Relationship	
Name		Relationship	

Education

Please list the highest level of education attained.

Institution attended	
Dates	
Accreditation achieved (degree, diploma, etc)	

Please list any other certifications or qualifications

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Employment History

Please list your employers during the past 10 years. Attach additional pages if you need more space.

Employer	
Position	
Dates	
Reason for leaving	

Employer	
Position	
Dates	
Reason for leaving	

Employer	
Position	
Dates	
Reason for leaving	

Community / Volunteer Service

Please list your community and volunteer experience during the past 10 years.

Organization	
Your role	
Dates	
Are you still involved?	

Organization	
Your role	
Dates	
Are you still involved?	

Organization	
Your role	
Dates	
Are you still involved?	

Why are you interested in a directorship with Peninsula Co-op?

What specific qualifications and/or experience can you contribute as a Director with Peninsula Co-op?

References

Please provide 3 references.

Name			
Phone – home		Phone - mobile	
Email			
How do you know this person?			
Length of time known			

Name			
Phone – home		Phone - mobile	
Email			
How do you know this person?			
Length of time known			

Name			
Phone – home		Phone - mobile	
Email			
How do you know this person?			
Length of time known			

Acknowledgement and Agreement

I hereby consent to the collection of the information in this application and to its use for the purposes of assessing my suitability for directorship with Peninsula Co-op and, if I am elected, for administration purposes.

I consent to an investigation of work and personal references as necessary to determine my suitability for directorship.

I understand that upon being nominated for directorship a criminal record and bonding check may be required and, if I am elected, I must maintain a clear criminal record throughout my directorship with Peninsula Co-op. I further understand that certain roles may require a credit check.

I hereby authorize my current employer (if applicable) and all previous employers and organizations contacted by Peninsula Co-op to provide any relevant information regarding my current and/or previous employment and I release all persons, employers of any and all claims for providing such information.

I certify that the information given by me in this application is true and complete to the best of my knowledge. I understand and agree that if I am elected, if any information on this application is found to be false, such information may be cause for immediate removal from my directorship.

Signature: _____ Date signed: _____

Please return to:
Peninsula Co-op - Nominations Committee
c/o Susan Herman, Director of Finance
1-2132 Keating Cross Road, Saanichton, BC V8M 2A6
Email: nominations@peninsulaco-op.com
Phone: 250-544-2947
Fax: 250-652-5298

Deadline for submission: April 1, 2023 at 8pm.