## Peninsula Consumer Services Co-operative Application for Directorship



Please attach your résumé.

Name						
Peninsu	la Co-op membership number					
Address						
Length o	of time at this address					
Phone -	home					
Phone - mobile						
Email						
Have yo	u been employed by Peninsula	Co-op in the	e 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.						
Organiza	ation					
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						
Employment History Please list your employers during the past 10 years. Attach additional pages if you need more space.						
Employe	er					
Position						
Dates						
Reason	for leaving					

Employer					
Position					
Dates					
Reason for leaving					
Employer					
Position					
Dates					
Reason for leaving					
Community / Voluntee Please list your commun	r Service nity and volunteer experience	during the past 10 years.			
Organization					
Your role					
Dates					
Are you still involved?					
Organization		T			
Your role					
Dates					
Are you still involved?					
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. Should I become an elected member of the Co-operative's Board of Directors, I agree to the be bound by Peninsula Co-op's Board Code of Conduct and Ethics, the rules of Peninsula Co-op, and the British Columbia Co-operative Association Act. 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:

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Peninsula Co-op - Nominations Committee

c/o Susan Herman, VP, Finance

1-2132 Keating Cross Road, Saanichton, BC V8M 2A6

Email: nominations@peninsulaco-op.com

Phone: 250-544-2947

Deadline for submission: March 30, 2024 at 8pm.