

Near North Crime Stoppers

135 Princess Ave P.O. Box 382
North Bay, ON P1B 8H5
Tel: 705-497-5555 #507
nearthnorthcrimestoppers.com

MEMBERSHIP APPLICATION FORM – DIRECTOR, NNCS BOARD OF DIRECTORS

Personal Information:

Last Name	Given Name (1)	Given Name (2)	Maiden Name
Complete Address		City	
Province	Postal Code	Preferred Phone Number	
Alternate Phone Number	E-Mail Address	Drivers License Number	
Date of Birth:		Referred by	
Why are you interested in becoming a board member?			
In what ways do you feel you can contribute to Near North Crime Stoppers?			
Please list the full names of all persons over the age of 18 residing at your address:			
Name:		Date of Birth	
Name:		Date of Birth	

Employment/Relevant Education History

Employer:	Your Title:		
Supervisor:	Supervisor Contact Number		
Supervisor Title:	Supervisor Email		
Brief description of duties:			
Employer:	Your Title:		
Supervisor:	Supervisor Contact Number		
Supervisor Title:	Supervisor Email		
Brief description of duties:			
Relevant Education/Designations (CPA, BBA, BA, Etc.)			
REFERENCES			
Please list two professional references (Minimum of one workplace)	Name	Relationship:	Contact:
	Name	Relationship:	Contact:
Is there any other information the committee should be aware of?			

Terms of Application

I understand that in order to become a director of Near North Crime Stoppers, I must not be currently charged with, or have been convicted of, a criminal offence, or be subject of an investigation. An applicant who is an active law enforcement officer, criminal justice representative / employee or government official will not be considered for membership with Crime Stoppers. Near North Crime Stoppers reserves the right to investigate the validity of all aspects of this application and may use public media and other sources during this process.

After an initial interview, a confidential review process of the application will be conducted by Near North Crime Stoppers Membership Committee. Acceptance or rejection of the applicant is at the sole discretion of Near North Crime Stoppers Board of Directors. The Board shall not provide written or verbal reasons for either the acceptance or rejection of any application.

If any information is discovered after acceptance to the program that may prove unacceptable to our mandate or that was not disclosed during the application process, it may be grounds for removal from the Board.

The applicant understands that he/she must provide Near North Crime Stoppers with a current Criminal Record check, at his/ her own expense. The applicant also understands that a police check will be conducted on all Board Members on an annual basis.

I have read the above and agree to provide the required information voluntarily and acknowledge that the information will be kept in strict confidence.

Date: _____ Signature: _____

Please forward this application to: Near North Crime Stoppers
 PO Box 382
 North Bay, ON P1B 8H5

OR

tracy@nearthcrimestoppers.com

Office use only

Date Reviewed by Membership Committee:		
Application Accepted:	Application Declined:	Date of Swearing in: