

CBCN BOARD MEMBER APPLICATION FORM 2024

Applicant Information	
First Name	Last Name
Street Address	Postal Code
City	Province/Territory
Date of Birth	Phone Number
Email Address	
Diagnosis Information	
Have you ever been diagnosed with breast cancer	?
What year were you diagnosed with breast cance	
Have you ever been diagnosed with metastatic br	reast cancer?
What subtype of breast cancer were you diagnose	ed with?
(HER2+, HR+, Triple Negative, other, unknown)	
Capacity as Board Member	
What is your understanding of CBCN and the role	it plays in the breast cancer community?
Provide a brief explanation of why you would like	to join CBCN's Board of Directors



Based on your understanding of CBCN, what work do you think is important for CBCN to be
undertaking?
under taking:
What is your understanding of governance in a non-for-profit organization?
How are you currently engaged with the breast cancer community?
Do you use social media to connect with the breast cancer community, and if so how and what
platforms?
Please list other Boards you have previously or currently serve on:
Trease list other bounds you have previously or currently serve on.
Please list other organizations that you are currently affiliated with and any other relevant volunteer
experience:



Being a board member requires a complementary balance of knowledge, skills, and experience. Please indicate your areas of skills and experience below.

Financial and/or Business Management	None	Fair	Good	Advanced
Health Policy and Advocacy	None	Fair	Good	Advanced
Legal	None	Fair	Good	Advanced
Corporate Sponsorships and Partnership Development	None	Fair	Good	Advanced
Fundraising	None	Fair	Good	Advanced
Board Governance	None	Fair	Good	Advanced
Media	None	Fair	Good	Advanced
Research and/or Clinical Experience	None	Fair	Good	Advanced

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Please list two professional references

References #1	References #2	
Full Name	Full Name	
Company	Company	
Relationship	Relationship	
Contact Information	Contact Information	



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Signature

CBCN values diversity and encourages applicants from diverse populations to apply for this position. We are looking for applicants from diverse backgrounds, including but not limited to diversity in: Race/ethnicity Sex/gender Disability Cultural Religious
For this reason, we invite you to identify if you are a member of a diverse population; submission of this information is voluntary.
Disclaimer and Signature
I certify that my answers are true and complete to the best of my knowledge.

Please submit a **COPY OF YOUR RESUME** along with this application to Bukun Adegbembo at badegbembo@cbcn.ca. All applicants will be contacted to be notified of the status of their application.

Date

Please note the APPLICATION DEADLINE is July 2, 2024