



Eating Disorders Action Group

a community based, charitable organization dedicated to promoting healthy body image and self-esteem and to supporting individuals who experience disordered eating

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Application Form to the Board of Directors of the Eating Disorders Action Group

Please return your application to *Board Recruitment* at the address or fax number above.

date: _____, 200_____

Name: _____

Address (city, postal code): _____

Telephone (area code): home: _____ work: _____

Fax: _____ Email: _____

Best time to contact you: () day _____ () evening _____

Currently employed at: _____

For how long: _____

Please describe your work: _____



Have you ever been a staff member or volunteer of a non-profit organization?

No **Yes, as staff**

Where? _____

For how long? And what was your position and duties? _____

No **Yes, as a volunteer**

Where? _____

For how long? And what was your position and duties? _____

If you are currently employed in government (municipal, provincial, federal), do you have any reason to believe that your employment would put you in a position of conflict as a member of EDAG's Board? If yes, please explain.

According to provincial legislation, a person who is an undischarged bankrupt cannot sit on the Board of Directors of a non-profit organization. Therefore, we kindly request that you answer the following questions:

Have you ever declared bankruptcy? **No** **Yes**

If yes, when were you discharged from bankruptcy? _____



1. Have you ever been a client / volunteer / employee of the Eating Disorders Action Group?

() **No** () **Yes, as a client / volunteer / staff member** (please specify)

When? (from/to) _____

2. Why are you interested in becoming a member of the Board?

3. What is your personal/professional experience in working with the issue of disordered eating/eating disorders?

4. What is your definition of an eating disorder?

5. What is your understanding of recovery?



6. EDAG is committed to recruiting members to its Board who reflect the diversity of our clients and community. For that reason, it would be helpful for us if you would identify those life experiences that you could bring around the issue of eating disorders/body image.

7. Do you possess skills or experience in any of the following areas?

- Eating Disorders
 - Proposal Writing
 - Human Resources Policy Development/Management
 - Programme Development and Education
 - Communications/Media
 - Fundraising and/or Promotion
 - Counselling/Therapy
 - Law
 - Cultural Interpretation
 - Financial Management/Planning
 - Strategic Planning
 - Social Action/Political Advocacy
 - Community Development
 - Other? _____
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8. What personal skills do you possess that would make you suitable for our Board?

9. What skills are you interested in developing?



10. Are you willing to engage in fundraising and/or revenue development?

() **No** () **Yes**

If so, what skills, experiences, characteristics and time do you possess that would assist us in this area of work?

11. Would you be able to commit approximately 5 – 7 hours per month (1 Board meeting, 1 internal committee)?

() **No** () **Yes,** _____

11. Having reviewed EDAG's:

- *Code of Ethics and Philosophy*
- *Mandate, Goals & Objectives, and*
- *Board of Directors Roles & Responsibilities*

do you have any questions or comments?

Thank you for your interest in the Eating Disorders Action Group.
We will contact you shortly.

