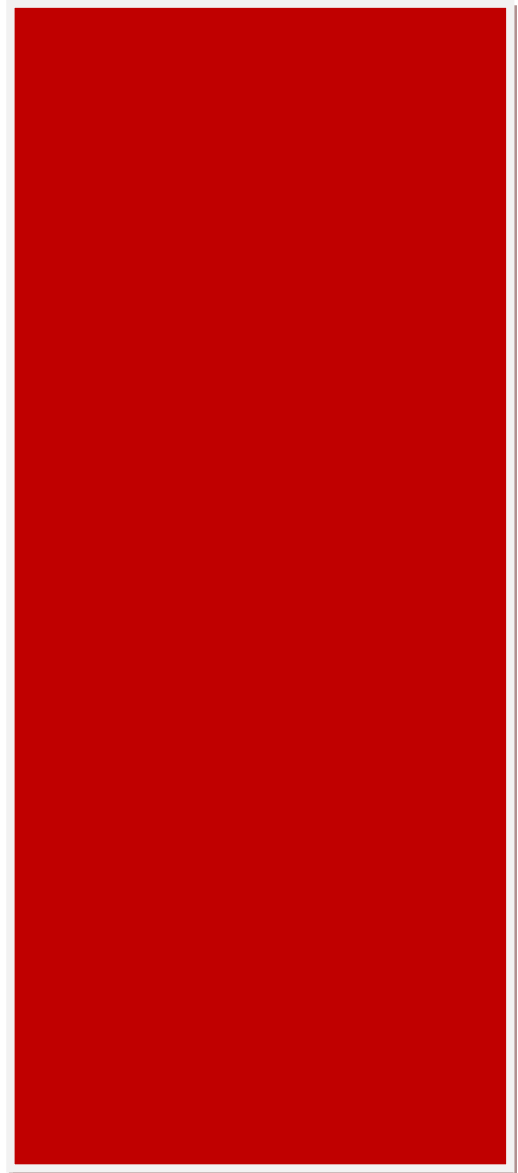

Canadian Art Therapy Association

Board Application



For Board Use Only:

Date

Personal meeting/conversation with a Board member

Application reviewed by Executive Committee

Attended a Board meeting

Interviewed by the Board

Action taken by the board -

CATA BOARD APPLICATION

This information is collected so that we have the correct contact information and know how to reach you whenever needed.

Full Legal Name:					
Name Usually Used:					
HOME:					
Mailing Address:					
Street Address (if different):					
Phone:		Fax:		Cell:	
Email:					
EMERGENCY CONTACT:					
Name:			Relationship:		
Contact Info - Days:			Eves:		
WORK INFORMATION:					
Employed by:					
Normal Hours:					
Position:		Email:			
Phone:		Fax:		Cell:	
Some members have two or three positions, so use this space if needed.					
Employed by:					
Normal Hours:					
Position:		Email:			
Phone:		Fax:		Cell:	
Employed by:					
Normal Hours:					
Position:		Email:			
Phone:		Fax:		Cell:	

1) Have you ever had any disciplinary action taken in a professional, academic, or volunteer capacity?
If so, please explain. Leave blank if not applicable

2) Have you ever had any professional or academic rights revoked or suspended?
If so, please explain. Leave blank if not applicable

Applicant Statement

I certify that all information I have provided in order to apply for this position is true, complete and correct. I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from CATA and still wish to be considered for the board position, it will be necessary for me to reapply and fill out a new application.

I understand that I am free to resign at any time, with or without cause, and with two weeks of notice. Similarly, CATA reserves the right to terminate my involvement with the organization upon a majority vote of the Board of Directors.

CATA does not tolerate unlawful discrimination in its board practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for board positions on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability or any other protected status under applicable federal, provincial or municipal law. Likewise, the CATA does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability or any other protected status.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to:

- 1) Eliminate me from further consideration for Board service, and
- 2) May result in my immediate discharge from CATA Board service, whenever it is discovered.

Date: _____

Signature: _____

Name: _____
(in block letters)