



Dear Friend,

The Brain Injury Association Sudbury & District is currently seeking candidates for a two year term for our Board of Directors in addition to Committee Members and Volunteers.

Who We Are?

BIASD is a support network for persons dealing with the affects of Acquired Brain Injury (ABI) in attempt to enhance the quality of life for survivors of acquired brain injury (ABI) and their family members and works towards reducing the occurrence of ABI. We are committed to providing support services for survivors and their families and educational services for the people in the Greater City of Sudbury and District.

Who Are We Looking For?

BIASD is looking for individuals who have a strong commitment to improving the quality of life for individuals who reside in the Greater City of Sudbury while living with the effects of Acquired Brain Injury (ABI). These individuals will have a proven leadership experience or organizational expertise in order to be an integral part of the BIASD Board of Directors and ABI community.

What Is Involved?

Board Members of BIASD commit to attend monthly meetings. As well, each Board member is expected to participate in at least one Board Committee. These Committees are Liaison, Member Services, Fund Development, Education and Communications.

The monthly time commitment for Board member can vary, but on average is between 5-10 hours per month. These are volunteer positions with no financial compensation.

How can you help?

Particular skill sets we are seeking include but are not limited to:

- Financial Management
- Legal Expertise
- Community Services Organization
- Event Planning
- Community Development
- Fund Development
- Public Education
- Information Technology
- Human Resources
- Marketing
- Media Relations
- Program Leadership

How to Apply?

Persons interested in applying to become a part of BIASD are asked to complete the enclosed application package and forward it to BIASD.

Thank you for your interest and consideration to become part of the BIASD family.

Yours truly,

Rebecca Thibodeau-Perry

Johanne Fillion

Rebecca Thibodeau-Perry
Board Member/Treasurer
Tel: 705-665-6023
recruitment@biasd.ca

Johanne Fillion
Board President
Tel: 705-675-2400
jfillion@acclaimability.com



Date received: _____

**APPLICATION FOR
VOLUNTEER SERVICES**

Part A: General Information

Name:

Last

First

Middle

Address:

Mailing Address

Street Address

City

Province

Postal Code

Phone Number:

Home Phone

Business Phone

Cellular

E-Mail Address:

Position Applying for:

- | | |
|--|--|
| <input type="radio"/> Board Member | <input type="radio"/> Office Volunteer |
| <input type="radio"/> Committee Member | <input type="radio"/> Event Volunteer |
| <input type="radio"/> IT Volunteer | <input type="radio"/> Other _____ |

Reasons for Volunteering:

- | | |
|---|---|
| <input type="radio"/> Community Involvement | <input type="radio"/> Community Hours |
| <input type="radio"/> Work Experience | <input type="radio"/> Education Requirement |
| <input type="radio"/> Board of Directors | <input type="radio"/> Other _____ |

How did you hear about us?

- | | |
|---|---------------------------------------|
| <input type="radio"/> Volunteer Sudbury | <input type="radio"/> Agency Brochure |
| <input type="radio"/> Internet/Website | <input type="radio"/> Newspaper |
| <input type="radio"/> Special Event | <input type="radio"/> Family/Friend |
| <input type="radio"/> Other _____ | |

Part B: Availability

When are you available to volunteer?

- | | | | | | | |
|---------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|
| | M | T | W | T | F | |
| Daytime | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> Weekends/Special Events |
| Evening | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> Flexible |

How long a commitment could you realistically make to BIASD, in terms of ongoing service?

- 3 months 6 months 12+ months Seasonal/As needed

Brain Injury Association Sudbury & District has a number of different opportunities for community volunteers to become involved in.

Please indicate the activities that may interest you:

Agency Support Services

- Reception Services (greeting clients, assisting with groups, checking messages, answering the telephone)
- Administration (mail outs, filing, organizing and data entry)
- Support Services (support group, meeting with clients, workshops)
- Governance (Board of Directors, advisory committees)

Education & Outreach

- Workshop/Conference Facilitation (public speaking, training volunteers and community partners)
- Newsletter (article writing, proofing, research, distribution, graphics)
- Webpage (update & maintain webpage)
- Peer Support Program (Mentor, Mentee or Coordinator)

Fundraising & Special Events (Volunteer work for special events includes but is not limited to: event planning, soliciting donations, distribution of promotional material, etc.)

- Golf Tournament
- Conferences
- Candle Vigil
- Other

Please highlight which skills and abilities you possess that may be relevant to the volunteer work that you would like to do with BIASD:

Part C: Background Information

Please briefly describe the following:

Volunteer Experience:

Work Experience:

Education, Training and/or relevant Life Experiences:

Part D: Requirements

Volunteers are required to submit a Criminal Reference Certificate (CPIC). A criminal record does not itself, automatically eliminate someone from consideration as volunteer. The nature of the criminal record and the applicant's subsequent community responsibility is taken into account when determining their suitability for volunteer service. Do you have any objections to submitting a CPIC certificate?

Yes No

Part E: References

Please provide us with two relevant references that will be able to comment on your past experience and skills:

Reference No. 1:

Name: _____

Phone Number: _____

Home Phone	Alternate Phone
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Relationship: _____

Reference No. 2:

Name: _____

Phone Number: _____

Home Phone	Alternate Phone
------------	-----------------

Relationship: _____

In making this application, I give permission to Brain Injury Association Sudbury & District to contact the people I have listed above as references for the purposes of determining my suitability as a Volunteer.

Applicant's Signature _____ **Date** _____

Please return this application to:

Contact: Rebecca Thibodeau-Perry, Board Member
Address: 567 Haig Street
Sudbury, ON P3C 5P8

Telephone: 705-670-0200
Fax: 705-222-24

Email: recruitment@biasd.ca

Thank you.



BOARD ATTENDANCE MEMORANDUM OF UNDERSTANDING

Purpose:

This memorandum of understanding is intended to support full contribution of all Board members. All Board members will receive a copy of this memorandum of understanding, which has been authorized by the Board on _____

Definition of a Board Attendance Problem:

A Board attendance problem occurs if any of the following conditions exist in regard to a Board member's attendance at Board meetings:

1. The member has 3 consecutive un-notified absences (un-notified means the member did not call before the upcoming meeting to indicate they could not attend the upcoming meeting.)
2. The member misses one third of the total number of Board meetings in a twelve-month period.

Suggested Response to a Board Attendance Problem:

If a Board attendance problem exists regarding a member, the Chair/ Board President will promptly contact the member to discuss the problem. In that meeting, the Board will decide what actions to take regarding the Board member's future membership on the Board. If the Board decides to terminate the Board member's membership, termination will be conducted as per this Memorandum of Understanding. The Board will promptly initiate a process to begin recruiting a new Board member.

Termination Process

The Chair/ Board President of the Board will call the member with the Board attendance problem and notify him or her of the Board's decision to terminate the member's membership per the terms of the Board Attendance Memorandum of Understanding. The Board will vote to confirm the member's resignation for non-compliance.

Board Member's Signature

Date

Witness Signature

Date



BOARD EXPECTATIONS

- 1) Know the corporate mandate; its mission, vision, and objectives; its operations and its by-laws;
- 2) Always act objectively and in the best interest of the Association;
- 3) Publicly support decisions of the Board;
- 4) Demonstrate loyalty to the Association, its Members, to fellow Board Members, Staff and Volunteers;
- 5) Prepare for all Board meetings and all Committee meetings of which the director is a member by reviewing all agenda material, including reports;
- 6) Attend and participate in all Board meetings and all Committee meetings of which the director is a member;
- 7) Each director is expected to participate in at least one sub-committee;
- 8) All Board Members are expected to adhere to all relevant policies and procedures of the Organization (see policies section);
- 9) All Board Members are expected to follow proper Office Procedures by communicating with the Office Liaison;
- 10) Keep careful notes at meetings and review the minutes of all meetings;
- 11) Obtain outside expert advice whenever necessary;
- 12) Disclose all personal dealings as early as possible;
- 13) Record and ensure that minutes accurately records all directors' disclosures, discussion and decisions;
- 14) Ensure that there are effective internal systems in all areas of corporate activity, particularly accounting;
- 15) Deal constructively with conflict situation working towards a resolution that is in the best interest of the Association and its Members;
- 16) Maintain proper record-keeping systems;
- 17) Ensure that the organization's legal affairs are in order, know the Board's legal obligations and make sure they are upheld;
- 18) To understand, and if necessary, query all financial and budget matters;
- 19) Keep Board discussions confidential;
- 20) Stay informed of the services provided by the association and publicly support those services;
- 21) Foster a positive working relationship with other Board members and volunteers;

Board Member's Signature

Date

Witness Signature

Date