



APPLICATION/PROFILE
FOR PERSONAL ATTENDANT CARE INC. BOARD OF DIRECTORS

Name: _____

Address: _____

Phone: _____

Date: _____

1. Business/Professional Background (list name of firm / organization, dates, and brief description of major responsibilities/ accountability): _____

2. Volunteer Experience (list organization, dates and brief description of major responsibilities / activities): _____

....leading the way to excellence in services for individuals with physical disabilities and their caregivers/families in the Durham Region.

1650 Dundas Street East, Suite 200
Whitby, Ontario L1N 2K8
Tel: 905-576-5603
Fax: 905-576-8020
E-mail: pacboard@gmail.com
Website: www.pacdurham.ca

Specific Skills / Competencies which could be an asset to Personal Attendant Care Inc. are:

Areas of interest in Personal Attendant Care Inc.:

Other organizational affiliations:

Academic Background (list of formal education and any certificate / continuing education programs):

I am committed to participating on Personal Attendant Care Board and Committee activities, in support of achievement of Personal Attendant Care "Mission and Vision".

Signature: _____

Date: _____

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