

September 2026

CHANGE HER WORLD
APPLICATION FORM FOR BOARD OF DIRECTORS

NAME OF APPLICANT:

ADDRESS:

PHONE: Home.....Work.....Cell.....

E-MAIL ADDRESS:

OCCUPATION: (Present or Past).....

REFERENCES:

(1) NAME:

ADDRESS:

CONTACT INFORMATION:

RELATIONSHIP TO APPLICANT:

(2) NAME:

ADDRESS:

CONTACT INFORMATION:

RELATIONSHIP TO APPLICANT:

Please explain briefly what has attracted you to the work of Change Her World and why you would like to serve on the Board of Directors?

.....

.....

.....

.....

What skills and abilities do you bring to the Board and how do you see those abilities being necessary and useful to the Board?

.....

.....

.....

.....

.....

.....

.....

Describe your perception of the role of a Board of Director..

.....

.....

.....

.....

.....

Please answer the following Yes or No

- | | |
|--|-------|
| I have read books from the CHW website suggested reading list | |
| I have volunteered at a CHW event | |
| I have initiated a fundraising opportunity for CHW | |
| I have attended the seminar “Hope for the Girl Child” | |
| I have talked to others about the plight of girls and women in the developing world. | |
| I have or currently do sponsor a child. | |

I would be willing to make a regular financial commitment to the work of this charity.

I have attended events focused on international development.

I have researched issues that pertain to the injustices and cruelty that many vulnerable females face in our world.

I would be willing to visit projects in the developing world.

I have served on a Board of Directors of a Charitable Corporation in the past.

Signature of Applicant: _____

Date: _____

PLEASE MAIL THE COMPLETED APPLICATION FORM TO:

Linda Willis
Chair of the Board
P.O. Box 1057
Stratford ON N5A 6W4

If you require further information, please call Linda Willis at 519-271-5598.