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**Member/Volunteer Application Form**

Thankyouso muchfor your interest in becoming involved with the Guelph-Wellington Local Immigration Partnership!

**Having a diverse membership is an important goal for the GWLIP. Anyone is invited to apply. Many of the questions in this form ask for specific information that can help us to ensure that we recruit members with varied backgrounds. However, if you are not comfortable answering a question, you can refrain from doing so.**

Personal information is collected under the authority of the Municipal Act, in accordance with provisions of Municipal Freedom of Information and Protection of Privacy (MFIPPA). For questions regarding the collection, use, and disclosure of personal information please contact Jennifer Slater, Program Manager Information, Privacy and Elections at (519) 822-1260 ext. 2349.

***To submit or ask questions regarding the application form please contact:***

***Nicholas Docherty***

[***nicholas.docherty@guelph.ca***](mailto:nicholas.docherty@guelph.ca)

***519-822-1260 ext. 2625***

***City Hall, 1 Carden St., Guelph, ON, N1H 3A1***

***Please submit a copy of your résumé with this application***

**PART 1: CONTACT INFORMATION**

|  |  |
| --- | --- |
| **Today’s Date (Day/Month/Year)**: Click here to enter a date. | |
| **Name**: | |
| **If you are representing an organization, please specify**: | |
| **Address**: | |
| **City/town**: **Prov**: ON **Postal Code**: | |
| **E-mail**: | **Phone**: |
| **Cell**: | **Emergency contact name and phone**: |

**PART 2: INTERESTS AND AVAILABILITY**

1. **Please select the GWLIP groups you are most interested in.**

Leadership Council

Action Committees: Meaningful Employment Grassroots Connections

Access to Services Research

Special events only

1. **Please mark the times you are available to participate in meetings or events:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** | **Sat** | **Sun** |
| Morning (9-12) |  |  |  |  |  |  |  |
| Afternoon (1-5) |  |  |  |  |  |  |  |
| Evening (5-9) |  |  |  |  |  |  |  |

1. **How long are you available to be a member?** Click here to enter text.

**PART 3: BACKGROUND AND PERSONAL PERSPECTIVE**

**4. How old are you?**

18-24 25-35 36-49 50-64 65+

**5. Did you immigrate to Canada?** Yes No

If yes, what year did you arrive? Click here to enter text.

**6. Do you work in a field directly related to immigration?** Yes No

**7. If you work, what sector do you consider yourself a part of?**

Public sector (e.g., any organization operated by government, health-care, schools, etc.)

Non-profit organization

Private sector (e.g., for-profit businesses and corporations)

Self-employed

Other (please describe) Click here to enter text.

**8. Do you own your own business?** Yes No

**9. If representing an organization or network, please provide information for the organization or network only**

Organization provides services to immigrants

Organization provides services to general population which includes immigrants

Organization is intending to serve immigrants

**10. Please explain why you (or your organization) are interested in joining the GWLIP. Is there a particular type of work that you’re interested in doing or learning as a member?** Click here to enter text.

***Continued on next page…***

**PART 4: SKILLS AND CAPACITIES**

The GWLIP aims to be diverse, effective, and sustainable and is looking for applicants that can make this happen. We value all levels of experience. Please draw on your personal, professional, volunteer, and educational background to identify your capacities and strengths.

Please respond to the following statements on a four-point scale from 1 (no experience or knowledge) to 4 (area of expertise).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PLEASE INDICATE IF YOU HAVE THE**  **SKILL & EXPERIENCE TO…** | **1** | **2** | **3** | **4** | **Don’t know/**  **does not apply** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1) Develop strategies to increase the diversity of GWLIP members.** |  |  |  |  |  |
| **2) Identify and advocate for innovative approaches to collaborative work.** |  |  |  |  |  |
| **3) Participate effectively in group work-planning and decision-making (including offering your own perspective).** |  |  |  |  |  |
| **4) Take a leadership role on specific initiatives, issues, or projects.** |  |  |  |  |  |
| **5) Connect GWLIP to community networks, groups, and projects. Please list which ones:** Click here to enter text. |  |  |  |  |  |
| **6) Adopt or champion GWLIP work and initiatives within own organization, community, or business as appropriate.** |  |  |  |  |  |
| **7) Attract investment or identify new revenue and grant sources.** |  |  |  |  |  |
| **8) Support the budgeting and financial literacy of the GWLIP.** |  |  |  |  |  |
| **9) Develop policies and procedures.** |  |  |  |  |  |
| **10) Support professional development of staff and members. Please identify skills/capacities you can teach:** Click here to enter text. |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PLEASE INDICATE IF YOU HAVE THE**  **SKILL & CAPACITY TO…** | **1** | **2** | **3** | **4** | **Don’t know/**  **does not apply** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **11) Keep the GWLIP up to date on local immigrant experiences.** |  |  |  |  |  |
| **12) Keep the GWLIP up to date on trends in policy and research related to immigration.** |  |  |  |  |  |
| **13) Track and evaluate the progress of the GWLIP towards objectives.** |  |  |  |  |  |
| **14) Support the marketing and communications work of the GWLIP.** |  |  |  |  |  |
| **15) Support strategic planning to set new objectives.** |  |  |  |  |  |
| **16) If you selected column 3 or 4 for any areas of expertise above, please provide more information on your experience (e.g., experience with personal or professional networks, boards of directors, immigration issues, community projects, etc.)** Click here to enter text. | | | | | |
| **17) Please note any other skills and experiences you want us to know about.** Click here to enter text. | | | | | |

**PART 5: KEY POLICIES: CONFIDENTIALITY & CONFLICT OF INTEREST**

Given the widely collaborative nature of the GWLIP, it is essential that the GWLIP uphold the strictest confidentiality and conflict of interest policies. By signing, you agree to abide by these policies. ***Please feel free to ask for clarification.***

**Confidentiality policy**

I understand that while I am a volunteer/member of the GWLIP, I may come across information, whether verbal, written, or computerized, that is confidential. I agree that I will not disclose any confidential/non-public information to anyone outside of the GWLIP that concerns GWLIP and partner business, or concerns a staff, volunteer, customer or other person associated with GWLIP or its partners.

**Conflict of interest policy**

Volunteers shall not use their position for personal gain, or undertake business activities that interfere or impact on the performance of their duties.

**Signature:** Click here to enter text.

**Date (Day/Month/Year)**:Click here to enter a date.