SENIORS ACTION QUEBEC

A SENIORS NETWORK ...FOR SENIORS ... BY SENIORS

## CANDIDATES FORM

Name: _____

Please Print

ADDRESS: _____

Email: _____

TEL: _____ CELL: _____

Brief CV including work & volunteer experiences.

_____

Indicate your involvement with the English-speaking community, past & current.

_____

CONT'D

Outline your expertise & interest that you feel would contribute to the Seniors Action Quebec board and Mission.

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Addition
Comments:_____
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SIGN: _____ DATE: _____

**Mail to:** Seniors Action Quebec
c/o Nominations Committee
781 Decarie B'lvd., Suite #204
Montreal QC H4H 3L3

**Email:** ruthpelletier613@gmail.com

**Membership can be paid online: www.seniorsactionquebec.ca**