

**YEG CPA Community Ambassadors Volunteer Application**

Chartered Professional Accountant Members or Candidates interested in becoming a volunteer with CPA Community Ambassadors team for the Edmonton Metropolitan Area, please print and complete this form, and attach and send it in confidence to:

***yegcommunityambassadors@gmail.com***

|  |  |
| --- | --- |
| **Contact Information** |  |
| First Name |  |
| Last Name |  |
| Preferred Phone Number |  |
| Email address |  |

**Employment Information**

|  |  |
| --- | --- |
| Employment Status | ☐ Employed☐ In between☐ Retired |
| Employer  |  |
| Position / Title  |  |
| Employment Sector – Current / Previous | ☐ Business / Industry☐ Public Practice ☐ Government / Public Service☐ Not-for-Profit / Charity |

**Designation**

☐ CPA ☐ FCPA

☐ CPA, CA ☐ FCPA, FCA

☐ CPA, CMA ☐ FCPA, FCMA

☐ CPA, CGA ☐ FCPA, FCGA

☐ CPA Candidate

**Previous Volunteer Experience**

Please list current and past community volunteer activities.

|  |  |  |  |
| --- | --- | --- | --- |
| **Organization** | **Volunteer Position** | **Activity** | **Term of Service** |
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I, the undersigned, am not aware of any facts or matters that would make me an unsuitable candidate, or hinder my ability to perform the required duties, for a volunteer position with the CPA Community Ambassadors team for the Edmonton metropolitan region.

☐ Yes, I am a member or candidate in good standing with CPA Alberta (or with another Canadian provincial CPA body). I agree to conduct myself, at all times, in a professional manner and in accordance with the Bylaws, Rules of Professional Conduct, and other policies of my provincial CPA body.

☐ Yes, I am able to volunteer up to four hours per month for two years to assist the YEG CPA Community Ambassadors team to meet its strategic roadmap objectives. I agree to abide by the responsibilities of volunteering with the CPA Community Ambassadors team for the Edmonton metropolitan region.

I consent that the information on this application form may be shared with the appropriate personnel of YEG CPA Community Ambassadors. I also consent to receiving information (emails) related to my role as a volunteer.

**Signature: Date:**

**Print Name:**

**City/Town Residence:**

Please use the following email address to: (1) submit your application; (2) forward any queries with regards to the volunteer position.

***yegcommunityambassadors@gmail.com***