

**PREMIER'S OFFICE AND
VIRGIN ISLANDS RECOVERY AND DEVELOPMENT AGENCY
BOARD MEMBER APPLICATION FORM**

DATE:

Instructions: Complete the form in its entirety and submit it with the required documents before the closing date posted within the vacancy notice to the Permanent Secretary, Premier's Office.

BOARD VACANCY DETAILS

VACANCY TITLE:	
CLOSING DATE OF VACANCY NOTICE:	

APPLICANT PERSONAL INFORMATION

NAME:		<input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MS <input type="checkbox"/> DR
COUNTRY OF BIRTH:		
IMMIGRATION STATUS:	<input type="checkbox"/> BELONGER <input type="checkbox"/> OTHER:	
EMPLOYMENT STATUS:	<input type="checkbox"/> EMPLOYED <input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> SELF-EMPLOYED	
OCCUPATION:		

CONTACT DETAILS

MAILING ADDRESS:		POSTAL CODE:	
EMAIL:			
TELEPHONE:		CELL PHONE:	

STATEMENT OF INTEREST	
What motivates you to become a Board member for the RDA?	
What special qualifications and /or skills would you bring to the Board?	
Describe your understanding of the role of the RDA.	
Describe your understanding of the role of RDA Board members.	
Describe any past Board experience which you may have had. Include the type of Board on which you participated (if applicable)	

RDA seeks a complementary balance of knowledge, skills and experience in the tourist industry both locally and regionally, and the regulatory framework of the industry. Please identify the areas in which you have basic or advanced competencies as well as areas in which you have an interest.

AREA	BASIC	ADVANCED	INTEREST
Governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human Resources Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accounting/Finance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Policy Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strategic Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infrastructure/Project Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law and Governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engineering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Would you be interested in serving on one of the Board's Committees?			
COMMITTEE	YES	NO	
Audit and Risk Committee	<input type="checkbox"/>	<input type="checkbox"/>	
Human Resources Committee	<input type="checkbox"/>	<input type="checkbox"/>	
Fund Raising Committee	<input type="checkbox"/>	<input type="checkbox"/>	
Executive	<input type="checkbox"/>	<input type="checkbox"/>	

REFERENCES			
Please submit two references who are familiar with your professional and/or previous Board/Committee experience.			
REFERENCE 1		REFERENCE 2	
RELATIONSHIP		RELATIONSHIP	
TELEPHONE		TELEPHONE	
EMAIL		EMAIL	

DECLARATION OF INTEREST	
Do you have any pecuniary or other direct or indirect personal interest in any area of business within the industry or is related to the operations of RDA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'Yes', please detail the extent of your interest below:	

CHECKLIST			
Ensure that the copies of the relevant documents are attached to your completed application.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resume and Credentials (Clean copies of relevant diplomas, certificates etc.)	Gov't Issued Id. (Passport Photo Page)	Police Record (Issued within the past six months)	Declaration Interest

DECLARATION OF APPLICATION
By submitting this application, resume and other details, I certify that the information in this application is accurate and true.

APPLICANT'S SIGNATURE	DATE