



CO-OPERATIVE HOUSING FEDERATION OF BC
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Workshop Leader Training Session

Application Form

Name: _____

Address: _____

Telephone (home) _____ **Telephone (work)** _____

Fax _____ **Email** _____

Date of application: _____

1. Please tell us about the roles or positions you have held in housing co-ops.

2. Please tell us about your co-op housing movement experience outside of your own co-op.

3. Please rate your level of knowledge in each of the following areas:

	Low		Medium		High
	1	2	3	4	5
Good governance and principled leadership					
Board of directors					
Finances					
Maintenance					
Membership and marketing					
Co-op legal requirements					
Successful meetings					
Member relations and conflict resolution					
Other					

Comments

4. List the CHF BC workshops you have attended, either at your co-op or at conferences or other CHF BC events.

5. List the workshops you have attended at CHF Canada AGMs or other events.

6. Please tell us about any other relevant experience you may have.

7. Why do you want to attend the Workshop Leader Training?

8. Tell us how CHF BC would benefit by adding you to our pool of workshop leaders.

9. In your view, what makes a successful workshop leader?

10. Other comments
