



# Board Oversight of Culture (BOC)

## Application for Admission

### COURSE OVERVIEW

This course is ideal for boards of directors of for-profit, crown and not-for-profit organizations who want to improve oversight of culture to help ensure a healthy and productive workplace. Participants will receive practical guidance and real world perspectives on how boards can better evaluate and monitor culture, improve their existing culture and help set the tone from the top.

The course will be taught by Hubert T. Lacroix, former president and CEO of CBC/Radio-Canada. Mr. Lacroix has served on the boards of numerous companies and non-profit organizations.

### LEARNING OBJECTIVES

Participants will be provided with leading edge insights and best practices including:

- Understanding the meaning and context organizations operate in and how this can impact an organization’s culture
- Importance of culture within the boardroom – from the selection of directors to avoiding unconscious bias
- Identifying the legal duties and potential liabilities of directors, including recent legislative changes
- How to assess and track your culture and what sources of information to use
- The nuances of the responsibility between the board and management for building and maintaining a healthy environment
- Tools and practical examples for leveraging change in an organization’s culture

### WHO WOULD BENEFIT? WHO SHOULD ATTEND?

- Directors of private for-profit and publicly-listed companies
- Directors of medium and large not-for-profit organizations, Crown corporation, and public ABCs
- Graduates of the ICD-Rotman Directors Education Program; or
- Experienced business executives who work with boardrooms, have just joined a board and/or are considering director roles.

### COURSE FORMAT

Applicants will be updated on the status of their application by email within 2 business weeks of receipt of an application.

### NOTICE OF ADMISSION

The course will utilize a combination of pre-readings, lectures and panel discussions in a series of modules presented by distinguished directors, legal experts and leading industry professionals.

### MEMBERSHIP IN THE ICD

The Institute of Corporate Directors is committed to providing its members with a wide range of tools, resources and services that support them in being effective directors and creating high-performing boards. If you are currently a non-member of the ICD, included in your course fee is a one-year ICD membership.

### COURSE FEE

For ICD.Ds with membership in good standing: \$950 Plus Applicable Taxes (see below chart)

For current ICD members: \$1,050 Plus Applicable Taxes (see below chart)

For non-members: \$1,395 Plus Applicable Taxes (see below chart)

### APPLICABLE TAXES: (Taxes are based on program location, not the applicant’s address)

Location	AB	BC	MB	NL	NS	ON	QC	SK
Applicable Tax Rate	5%	5%	5%	15%	15%	13%	14.975%	5%



# Board Oversight of Culture Application Form

City \_\_\_\_\_ BOC Course Location (City) \_\_\_\_\_ Course Start Date \_\_\_\_\_

Should class space not be available for the course to which you have applied – would you like your application forwarded to the next available class?

Yes  No If Yes, please note the preferred city \_\_\_\_\_

## APPLICANT

Mr.  Ms.  Mrs.  Dr.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Preferred Name \_\_\_\_\_

## BUSINESS CONTACT DETAILS

Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Ext. \_\_\_\_\_ Fax \_\_\_\_\_ Participant E-mail \_\_\_\_\_

Assistant's E-mail \_\_\_\_\_ Company Web site \_\_\_\_\_

## HOME CONTACT DETAILS

Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Cellular \_\_\_\_\_

Preferred mailing address:  Business  Home

### ICD MEMBERSHIP STATUS

ICD Member?  Yes  No

Member Since: \_\_\_\_\_

ICD Chapter: \_\_\_\_\_

Member ID: \_\_\_\_\_

\*If you require assistance with your membership information, please contact the ICD at membership@icd.ca or 1.877.593.7741 x289.

### CURRENT EMPLOYMENT

Current Title/Position \_\_\_\_\_

Company/Organization \_\_\_\_\_

Type of Company:  Public For Profit  Private For Profit  Commercial Crown  Not-For-Profit (including NFP Crowns)

Company Size (by annual gross revenue):  Under \$500 million  Over \$500 million  Over \$1 billion

Industry Sector (select one from the choices below):

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Academia & Education              | <input type="checkbox"/> Entertainment & Media  | <input type="checkbox"/> Natural Resources          |
| <input type="checkbox"/> Advertising & Marketing           | <input type="checkbox"/> Environment            | <input type="checkbox"/> Pharmaceuticals            |
| <input type="checkbox"/> Accounting & Financial Services   | <input type="checkbox"/> Government             | <input type="checkbox"/> Professional Services      |
| <input type="checkbox"/> Agriculture & Food Production     | <input type="checkbox"/> Human Resources        | <input type="checkbox"/> Retail & Consumer Products |
| <input type="checkbox"/> Aviation & Aerospace              | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Security & Defense         |
| <input type="checkbox"/> Banking, Finance & Investments    | <input type="checkbox"/> Industrial             | <input type="checkbox"/> Tourism & Hospitality      |
| <input type="checkbox"/> Broadcasting & Telecommunications | <input type="checkbox"/> Insurance              | <input type="checkbox"/> Transportation             |
| <input type="checkbox"/> Building & Construction           | <input type="checkbox"/> Medical & Healthcare   | <input type="checkbox"/> Other, please specify      |
| <input type="checkbox"/> Consumer Products & Manufacturing | <input type="checkbox"/> Mining                 |   |
| <input type="checkbox"/> Energy & Power                    |   |   |

### PREVIOUS EMPLOYMENT EXPERIENCE

1. \_\_\_\_\_  
 Title/position Company/Organization Years Held i.e. 2001-2009

2. \_\_\_\_\_  
 Title/position Company/Organization Years Held i.e. 2001-2009

3. \_\_\_\_\_  
 Title/position Company/Organization Years Held i.e. 2001-2009

4. \_\_\_\_\_  
 Title/position Company/Organization Years Held i.e. 2001-2009

5. \_\_\_\_\_  
 Title/position Company/Organization Years Held i.e. 2001-2009

**EDUCATION (where you earned your highest degree)**

Name of institution Degree Earned Year of Graduation

**PLEASE LIST BOARD EXPERIENCE**

ORGANIZATION	TYPE OF COMPANY i.e.: Public For Profit, Private For Profit, Commercial Crown, Not-For-Profit (including NFP Crowns)	SIZE OF ORGANIZATION REVENUE i.e.: Under \$500 million, Over \$500 million, Over \$1 billion	INDUSTRY SECTOR Refer to industry sector selection on page 3 under Current Employment.	BOARD POSITION i.e.: Chair, Vice-Chair, Audit Committee Chair, Governance Committee Member	YEARS SERVED i.e.: 2001-2005

## CANCELLATION POLICY

Refunds will be given for cancellations received in writing to the ICD no later than 14 days before the start date of the course, and will be subject to an administrative fee of \$250 (plus applicable taxes). No refunds or credits will be provided for cancellations received less than 14 days before the start date of the course. Non-attendance will incur the full course fee. Should the ICD need to cancel or postpone a course offering, applicants will be issued a full refund. Complimentary membership will be revoked in case of a refund.

## COLLECTION OF PERSONAL INFORMATION AND PROTECTION OF PRIVACY

For more details visit [www.icd.ca/privacy](http://www.icd.ca/privacy).

## DECLARATION

I hereby certify that all statements on the application and in any material filed in support hereof are true, correct and complete and all material information has been disclosed. I understand that if the Institute of Corporate Directors (ICD) finds to the contrary, my association with, admission to, or registration in the course may be rescinded and cancelled after notice in writing to me. Once registered in the BOC course, I understand that I am fully responsible for all fee payments. I pledge to conduct myself in a manner of integrity, honesty and respect for individuals in the ICD community. If I am found to act in a manner contrary to the aforementioned values, I understand that I may be required to withdraw from the course.

## SIGNATURE

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## PLEASE SEND YOUR COMPLETED APPLICATION FORM TO:

Institute of Corporate Directors  
Attn: BOC registration administrator  
2701–250 Yonge Street, Toronto, ON Canada M5B 2L7  
T: 416.593.7741 x289  
T: 1.877.593.7741 x289  
F: 1.888.398.4794  
[education@icd.ca](mailto:education@icd.ca)  
[www.icd.ca](http://www.icd.ca)

**METHOD OF PAYMENT**

- Enclosed, please find my cheque payable to the **Institute of Corporate Directors**
- I would like to make payment by:  Visa  MasterCard
- For ICD.Ds with membership in good standing: \$950 Plus Applicable Taxes (see chart on page 1)
- For current ICD members: \$1,050 Plus Applicable Taxes (see chart on page 1)
- For non-members: \$1,395 Plus Applicable Taxes (see chart on page 1)

---

Card # Expiry Date (mm/yy)

---

Name on Card

---

Signature of Applicant Authorized cardholder signature (if different from applicant)

---

Date

Course fees are due at the time of application. In the event that the applicant is not admitted into the course, a refund will be issued.

**SOCIAL INSURANCE NUMBER**

The Canada Revenue Agency (CRA) requires not-for-profit and educational institutions to include a Social Insurance Number (SIN) with all filings of the T2202 Education and Textbook Amounts Certificate form. The ICD must provide this information to the CRA in order to issue course participants a receipt for income tax purposes.

If you wish to provide this information through our secure webpage, please indicate so below and visit <https://icd.ca/secureSIN>. If you DO NOT require a receipt for income tax purposes, we kindly ask that you click the box below and confirm your decision to decline.

For more information regarding the new CRA requirements, please refer to the [CRA website](#).

- Online Submission
- OPT OUT – No Tax Receipt Required

---

SIN Applicant's Signature