



# Board Oversight of Technology (BOT)

## Application for Admission

### COURSE OVERVIEW

This course will provide directors with the essential knowledge, framework and skill sets to allow them to make informed decisions as directors for overseeing critical areas of technology and how this intersects with their oversight role. This includes cyber security, privacy, social media engagement and reputation management, managing IT projects and understanding how emerging technologies will impact their organization.

The course will be taught by technology governance experts Estelle Métayer and Michael Parent.

### LEARNING OUTCOMES

This course will provide participants with the following benefits:

- Understand the sources, nature, and extent of both insider and outsider cyber threats facing organizations
- Identify the knowledge and skills necessary to effectively oversee cyber-resilience in their organization, including cybersecurity audits, cyber insurance, monitoring and testing, and emerging technologies like AI
- Understand the evolving nature of the regulatory environment, and the growing need for data and privacy, including the GDPR, PIPEDA and CCPA
- Develop the knowledge and skills to adequately protect themselves, as individuals, from identity theft, spoofing, and other cybercrimes, including an overview of common protection tools and techniques
- Learn to develop a robust risk assessment analysis for major IT projects and understand how to manage and mitigate risks at the board level
- How awareness and understanding of how a social reputation crisis can unfold and design a process to anticipate and build the appropriate social communication channels with stakeholders.
- Develop a solid governance of an organization’s roadmap to new technologies
- Dissect how boards have responded when technology choices have impacted negatively a company’s reputation and/or value creation

### WHO WOULD BENEFIT? WHO SHOULD ATTEND?

- Directors of private for-profit and publicly-listed companies
- Directors of not-for-profit organizations, Crown corporation, and public ABCs
- Past graduates of the ICD-Rotman Directors Education Program; or
- Experienced business executives who want to improve their understanding of the director’s role and technology

### NOTICE OF ADMISSION

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

### 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: \$3,450 Plus Applicable Taxes (see below chart)

For current ICD members: \$3,550 Plus Applicable Taxes (see below chart)

For non-members: \$3,895 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 Technology Application Form

City BOT 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



## 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 BOT 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

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Applicant's Signature

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Date

## PLEASE SEND YOUR COMPLETED APPLICATION FORM TO:

Institute of Corporate Directors  
Attn: BOT registration administrator  
2701–250 Yonge Street, Toronto, ON Canada M5B 2L7  
T: 416.593.7741 x229  
T: 1.877.593.7741 x229  
F: 1.888.398.4794  
education@icd.ca  
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: \$3,450 Plus Applicable Taxes (see chart on page 1)
- For current ICD members: \$3,550 Plus Applicable Taxes (see chart on page 1)
- For non-members: \$3,895 Plus Applicable Taxes (see chart on page 1)

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Card # Expiry Date (mm/yy)

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Name on Card

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

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Date Promotional Code

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

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SIN Applicant's Signature