

## ILA Certified Director - List of Mandates

**Please describe your experience as a Board member**

*\* in case of mandate in an ASBL or a NPO, please fill the additional form (Sheet 2)*

[illegible]

*I hereby declare that the preceding information is true and exact, and I am aware that my certification can be withdrawn in case of false statement*

Date & Signature



Please describe your experience as a board member of an entity (ASBL or NPO)

|   |  |
|---|--|
| <b>General Information</b>  |  |
| Name of the entity  |  |
| Mission of the entity<br>(description of the economic activities) |  |
| Date of creation  |  |
| Number of employees   |  |
| Annual budget   |  |
|   |  |
| <b>Board of Directors</b>   |  |
| Mandate starting date   |  |
| Mandate ending date   |  |
| My role in the board  |  |
| Number of board meetings per year                                 |  |
| Number of board members   |  |
| Description of Board responsibilities                             |  |

*I hereby declare that the preceding information is true and exact, and I am aware that my certification can be withdrawn in case of false statement*

Date & Signature

Non executive Director  
Executive Director  
Chair

Yes  
No