



Canadian
Down Syndrome
Society

Société canadienne du
syndrome de Down

***Voices at the Table Advocacy (VATTA) Committee
Application Form***

Please fill out this form to tell VATTA about yourself. Send it to VATTA at CDSS. The address is on the last page.

Your name: _____ Age: _____

Home Address:

City: _____ Province: _____

Postal Code: _____

Phone number (including Area Code):

Email Address: _____

See the ability

Canadian Down Syndrome Society
Suite 103 - 2003 14 Street NW
Calgary, AB T2M 3N4
cdss.ca | info@cdss.ca | 1-800-883-5608

What do you know about the VATTA Committee?

Why do you want to be on the VATTA Committee?

What do you like to do for fun?

Do you go to school now? If so, what program are you in?

Do you work now? If so, where do you work?

Do you volunteer now? If so, what do you do?

Are you available to travel away from home in the months of September, January, and May?

VATTA members usually travel to meetings on their own and share a room with another VATTA member. Are you comfortable doing this?

Can you give us an example of a time when you worked in a group or on a team?

Have you ever flown on an airplane before?

Are you able to fly alone to VATTA meetings?

Have you ever spoken to a group of people about Down syndrome?

When did you speak to the group(s)?

Have you ever been interviewed about Down syndrome?

What do you think makes a good advocate?

What do you need to learn most so that you can be an even better advocate for people with Down syndrome?

What plans do you have for next year and the year after?

Is there anything else you would like to tell us?

Please mail this form to the CDSS before September 15, 2014. Our address is:

VATTA

c/o Canadian Down Syndrome Society

Suite 103 - 2003 14th Street NW

Calgary, AB T2M 3N4

Or you can email it to kirk@cdss.ca

If you have any questions, call Kirk at 1-800-883-5608 (for free).