



Board of Directors or Board Recruitment Application

Instructions:

1. To apply to be a member of our Board of Directors, or to be appointed to a Board Committee, you must complete this application form and submit it with a copy of your current resume using the following information:

Attention: Board of Directors
South Huron Hospital Association
24 Huron St. W.
Exeter, ON N0M 1S2
Fax: 519-235-3405
Email: shha.administration@shha.on.ca

2. The application deadline will be determined annually.
3. For more information concerning this application process, please contact Stevie Cowdrey, Executive Assistant, at 519-235-2700 ext. 5151.

Applicant Contact Information

Full Name:	
Home Address:	
City/Town:	
Postal Code:	
Telephone Number:	
Email Address:	
Date of Birth (MM/DD/YY):	

Eligibility Criteria & Commitment Expectations

1. Must be at least 18 years of age.
2. Must have been a resident of, be employed, or carry on business in the geographical area considered to be the catchment area of the hospital for at least three months prior to being considered as a potential member.
3. Expected to commit the time required to discharge the duties of Board and Committee membership (minimum 10-15 hours per month).
4. Must fulfill the requirements and responsibilities as outlined in [Policy 02-014 - Position Description – Board of Directors](#).
5. Board members are required to sign a Declaration of Understanding relating to confidentiality and conflict of interest policies on an annual basis.

Conflict of Interest Disclosure

Individuals serving on the Board of Directors or any Board Committee must avoid conflicts between self-interest and their fiduciary duty to the hospital. Please identify below any relationship with a current employee of the hospital (or with another organization) which may create a conflict of interest, or have the appearance of a conflict of interest, by virtue of being appointed to the Board or Board Committee.

Knowledge and Skills

Besides searching for diversity in our board members, we also seek out a balance of various skills, knowledge, and experience that complement each other. Please complete Schedule A (attached to this form) regarding your knowledge and skills.

Experience

Please list your past experience in Governance at either a Board or Board Committee level.

Please describe any connections you have had with other healthcare organizations.

Are there any particular areas of Governance work which are of particular interest to you?

Declaration

By submitting this application form, I declare the following:

1. I meet the eligibility requirements as outlined above.
2. I have read, understood, and agree to comply to the following Board Policies:
 - a. [02-014 - Position Description – Board of Directors](#)
 - b. [02-012 – Code of Conduct](#)
 - c. [02-011 – Conflict of Interest](#)
3. I understand that my personal application submission will be subject to a formal screening and selection process, which may or may not result in my successful election or appointment to the Board.

Name:

Date:

By checking the box below, you certify that you have read this application form, that you know and understand the meaning and intent of this agreement, and that you are entering this knowingly and voluntarily.

I agree.

Schedule A – Skills & Knowledge

As you answer the following questions, please think in terms of your entire wealth of experience, including volunteer, professional, and personal knowledge and experience.

Please use the drop downs in the first column to rate your knowledge on the competencies and fields of endeavor items as one of the following:

- 1 = No Knowledge
- 2 = Some Knowledge
- 3 = Working Knowledge
- 4 = Ample/Abundant Knowledge
- 5 = Vast/Expert Knowledge

Please use the drop downs in the second column to rate your experience on the competencies and fields of endeavor items as one of the following:

- 1 = No Experience
- 2 = Some Experience
- 3 = Sufficient/Adequate Experience
- 4 = Considerable Experience
- 5 = Extensive Experience

Note: If you are unable to fill out the form electronically, please print and complete using the rating scale indicated above to answer.

Competencies: Knowledge & Experience

	<u>Knowledge</u>	<u>Experience</u>
Chaired the Board of an organization		
Chaired a committee of an organization		
Governance		
Fundraising		
Business Development		
Management		
Leadership		
Human Resources		
Strategic Thinking & Planning		
Analytical Thinking		
Conceptual Thinking		
Entrepreneurial		
Ethics		
Project Coordination		
Personnel Development		
Risk Management		

Advocacy		
Program/Policy Development		
Volunteer Engagement		
Creating Partnerships		
Social Media		
Communications		
Team Work		
Creativity		
Other Please specify:		

Fields of Endeavour: Knowledge & Experience

	<u>Knowledge</u>	<u>Experience</u>
Healthcare		
Senior's Care & Senior Issues		
Housing		
Research		
Education		
Politics		
Retail		
Finance		
Quality & Performance		
Sales		
Construction		
Marketing		
Real Estate		
Legal		
Public Relations		
Social Services		

Information Technology		
Other Please specify:		

Sector Experience

<u>Experience</u>	
Private	
Public	
Nonprofit	