

BOARD MEMBER APPLICATION

Please return this completed form and resume by November 17, 2023 to:

HFHT Board of Directors
Betsy Rouw, Administrative Assistant
Haldimand Family Health Team
245 Argyle St. S., Suite 3, Caledonia, ON N3W 1K7
email: betsy.rouw@haldimandfht.ca

Surname:		First Name:	
Home Address:			
City:	Province:	Postal Code:	
Status: Employed:		Retired:	
Home Phone #:		Business Phone #:	
E-Mail Address:			
Preferred Method of Contact: Home Phone () Business Phone () E-Mail ()			

Eligibility Criteria and Conditions of Appointment

- a) Directors must be at least 18 years old, mentally competent and cannot have an undischarged bankruptcy.
- b) In the case of a Physician, be affiliated with a Family Health Organization (FHO).
- c) Current HFHT employees, their immediate family members are ineligible to serve as directors.
- d) Former employees of the HFHT are not eligible to serve as directors until a minimum of one year after their employment with the Corporation has been terminated.
- e) A director is expected to commit the time required to perform board and committee duties. The minimum time commitment is likely 3-7 hours per month. Reliable internet is required as meetings may be both virtual and in-person.
- f) Directors must fulfill the requirements and responsibilities of their position, for example, preparing for and attending board and committee meetings, participating in training required for board members, upholding their fiduciary obligation to the HFHT, and working cooperatively and respectfully with other board members.
- g) Directors must have their principal residence or carry-on business within Haldimand County.
- h) Directors must sign a code of conduct & confidentiality agreement as well as a conflict of interest agreement.

The Haldimand Family Health Team is committed to providing equal opportunities for all volunteers and to providing an environment free of discrimination and harassment.

Please briefly state your reasons for wishing to become a Director of the Haldimand Family Health Team:

Conflict of Interest Disclosure Statement:

Directors must avoid conflicts between their self-interest and their duty to the HFHT. In the space below, please identify any relationship with any organization that may create a conflict of interest, or the appearance of a conflict of interest, by virtue of being appointed to the Board.

Knowledge, Skills, and Experience:

The Board seeks a complementary balance of knowledge, skills, and experience. Please indicate your areas of knowledge, skills, and experience by completing **Schedule A** to this application.

Please list current or prior board experience:

Which areas of the Board work are of particular interest to you?

Declaration:

By submitting this application, I declare the following:

- a) I meet the eligibility criteria and accept the conditions of appointment set out above.
- b) I certify that the information in this application and in my resume/CV is true.

Signature: _____ Date: _____

Schedule A

Application for Membership (please include resume or CV) Knowledge, Skills, and Experience

Please indicate your areas of knowledge, skills, and experience by checking off the relevant boxes in the table below. It is not expected that you possess knowledge, skill, or experience in all the areas set out in the table. Please indicate only those areas that apply to you.

Knowledge, Skills, Experience	Advanced	Intermediate	Basic	None
Financial Management / Audit				
Board & Governance				
Human Resources Management				
Health Care Administration / Program Development				
Clinical Skills				
Government & Government Relations Political Acumen				
Quality Improvement				
Strategic Planning				
Legal				
Patient & Health Care Advocacy				
Risk Management				
Information Technology				
Performance Measurement				
Community Relations				
Business Management				
Public Affairs & Communications				
Diversity Issues				

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