Algoma Nurse Practitioner-Led Clinic

BOARD MEMBER APPLICATION FORM

Name		
Home Address		
Phone	Fax	Email
Employment Name & Address (i	f applicable)	•
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Phone	Fax	Email
Summarize you experience with	and/or interest in our organization	l

What skills and knowledge are you willing to bring to our board? Please indicate your experience in the following areas.	very experienced	some experience	little or no experience
previous board experience			
strategic planning			
legal knowledge			
board development (recruitment, training, evaluation)			
health care program planning and evaluation			
recruiting, hiring and evaluating personnel			
financial management and control (budgeting, accounting)			
communication, public and media relations			
policy development			
public speaking			
organizational development			
information technology			



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For the items you checked as 'very experienced' or 'some experience', please provide details below;

*Please note a police records check will be required.

Please mail, fax, or email completed application to:

Algoma Nurse Practitioner-Led Clinic
Attention: Chair of the Board Nominating Committee
443 Northern Avenue
Sault Ste. Marie, ON P6A 5L3
705-942-9687

Chair HR Committee email:

