

2019 BOARD NOMINATION FORM

Epilepsy Tasmania

The Epilepsy Tasmania invites Board nominations from suitably skilled people with an interest in health, and the community health sector. This is a voluntary position, with 4 (4) vacancies available for a two (2) year term.

TIMELINE

Nominations open:	21 st October 2019
Nominations close:	C.O.B 11 th November 2019
Nominees endorsed and notified:	2 weeks prior to the December 2019 AGM

NOMINATION PROCESS

Criteria for nomination

Under Section 17.3 of the Epilepsy Tasmania Constitution, the Epilepsy Tasmania Board invites nominations from suitably skilled people who have:

- At least one of the skills listed in Section 1 of the Skills Declaration, and/or
- Have some association or lived experience with Epilepsy within the Tasmanian community

EPILEPSY TASMANIA Constitution extract

17.3 *The Board shall determine the skills required to meet the governance needs of Epilepsy Tasmania from time to time and must advise members of the skills required at the time of calling for nominations.*

Completing the nomination form

Please complete the following:

- Personal Details
- Skills Declaration – Section 1 by ticking at least one box of the skills and confirming skill level
- Nomination Statement - please provide any additional, relevant information. Please note this will not form part of the endorsement process, however if this application is endorsed, the Nomination Statement will be circulated to the Epilepsy Tasmania membership with the ballot papers
- Provide contact details of one referee
- Sign the declaration

Nominations must be received by the public officer: by C.O.B 11th November 2019.

By email: admin@epilepsytasmania.org.au

By mail: The Public Officer Epilepsy Tasmania, Level 1, 1-7 Liverpool Street, Hobart TAS 7000.

*Please note, late nominations cannot be accepted.

Nominee endorsement

The Nominations Committee will review and endorse candidates. All candidates will be advised of their endorsement status no later than 2 weeks prior to the December AGM 2019.

Personal Details:

Name:	
Address:	
Daytime Phone Number:	
Email Address:	

Skills Declaration – Section 1:

I nominate as a candidate for the Epilepsy Tasmania Board, having at least one of the following skills, qualification or experience:

<input type="checkbox"/>	Finance and risk: <i>Please indicate your level of competence against this skill:</i> <input type="checkbox"/> No relevant qualifications or skills <input type="checkbox"/> Hold formal qualifications <input type="checkbox"/> Hold formal qualifications and at least 2 years' experience <input type="checkbox"/> No formal qualifications some experience <input type="checkbox"/> Other (please state)
<input type="checkbox"/>	Health service knowledge/ experience: <i>Please indicate your level of competence against this skill:</i> <input type="checkbox"/> No relevant qualifications or skills <input type="checkbox"/> Hold formal qualifications <input type="checkbox"/> Hold formal qualifications and at least 2 years' experience <input type="checkbox"/> No formal qualifications some experience <input type="checkbox"/> Other (please state)
<input type="checkbox"/>	Community sector knowledge/experience: <i>Please indicate your level of competence against this skill:</i> <input type="checkbox"/> No relevant qualifications or skills <input type="checkbox"/> Hold formal qualifications <input type="checkbox"/> Hold formal qualifications and at least 2 years' experience <input type="checkbox"/> No formal qualifications some experience <input type="checkbox"/> Other (please state)
<input type="checkbox"/>	Business / commercial acumen: <i>Please indicate your level of competence against this skill:</i> <input type="checkbox"/> No relevant qualifications or skills <input type="checkbox"/> Hold formal qualifications <input type="checkbox"/> Hold formal qualifications and at least 2 years' experience <input type="checkbox"/> No formal qualifications some experience <input type="checkbox"/> Other (please state)
<input type="checkbox"/>	Governance knowledge/ experience: <i>Please indicate your level of competence against this skill:</i> <input type="checkbox"/> No relevant qualifications or skills <input type="checkbox"/> Hold formal qualifications <input type="checkbox"/> Hold formal qualifications and at least 2 years' experience <input type="checkbox"/> No formal qualifications some experience <input type="checkbox"/> Australian Institute of Company Directors qualification <input type="checkbox"/> Other (please state)

Nomination Statement: Section 2

Nomination statement (200 words maximum – this will form the basis of your nomination statement which will be circulated to Epilepsy Tasmania members):
Please include what interests you in being a part of the Epilepsy Tasmania board.

Current position title and qualifications including relevant awards, previous Board experience or any other relevant information (200 words maximum)

Referee:

Please nominate one referee/s who can verify your nomination:

Name:	
Contact:	

Skills Declaration:

I certify that the details provided above in support of my nomination for the Epilepsy Tasmania Board are correct. I agree to abide by the Board election process as outlined in Epilepsy Tasmania constitution and policy. I agree for the details I provide in the nomination form to be shared with members. I understand it will not include my personal contact or referee details.

Candidate Signature: _____ Date: _____