



# MICs Group of Health Services

Matheson – Iroquois Falls - Cochrane

## Application for Board Membership

Bingham Memorial Hospital       Anson General Hospital       Lady Minto Hospital

**I provide the following information with respect to my application for membership on the board.**

Name:      (first) \_\_\_\_\_ (middle) \_\_\_\_\_ (last) \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Tel. Number: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

To apply to be a member of the MICs Board of Directors, you must complete this form and submit it with a copy of your current resume or a brief biographical sketch.

### 1. Qualifications of Directors

- (a) No individual shall be qualified for election or appointment as a Director if the individual:
- (i) is under 18 years old
  - (ii) has been found under the *Substitute Decisions Act, 1992* or under the *Mental Health Act* to be incapable of managing property
  - (iii) has been found to be incapable by any court in Canada or elsewhere
  - (iv) has the status of a bankrupt
  - (v) is an "ineligible individual" as defined in the *Income Tax Act* (Canada) or any regulations made under it
  - (vi) does not have their principal residence or carry on business within the area served by the Corporation as established by the Board from time to time, except by resolution of the Board, and
  - (vii) is a current employee or Professional Staff member, except as provided under the *Public Hospitals Act*, except by resolution of the Board.

- (b) The Board's decision as to whether or not a candidate is qualified to stand for election shall be final.

To the best of my knowledge, I am qualified to be a Director of the Hospital.      Yes  No

I am presently, or in the process of, declaring bankruptcy.      Yes  No

### 2. 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 or by listing these below.

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Please list current or prior board experience:

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Which areas of board work are of particular interest to you?

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Please describe any linkages you have or may have had with other health care groups within the community.

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**3. 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 or biographical sketch is true.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please email the completed application to [Tiffany.Smith@micsgroup.com](mailto:Tiffany.Smith@micsgroup.com) or drop it off at your local hospital reception to the attention of Tiffany Smith, MICs Executive Assistant **prior to 12:00 p.m. on**

\_\_\_\_\_.

## Appendix A

### 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, skills or experience in all the areas set out in the table. Please indicate only those areas that apply to you. Please note that board members are required to have an internet connection and have a working knowledge of computers (tablet, laptop, desktop).

<b>Accounting</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Computer Skills</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Board &amp; Governance</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Labour Relations</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Business Management</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Legal</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Clinical</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Patient &amp; Health Care Advocacy</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Construction &amp; Project Management</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Political Acumen</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Diversity Issues</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Public Affairs &amp; Communications</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Education</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Quality &amp; Patient Safety Management</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Ethics</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Quality &amp; Performance Management</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Finance</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Research</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Government &amp; Government Relations</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Risk Management</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Health Care Administration &amp; Policy</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Stakeholder Engagement</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
<b>Human Resources Management</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	<b>Strategic Planning</b> <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced

**LEGEND:**

**Basic:** having some knowledge of the rudimentary principles, i.e. keeping up with current news in the media

**Intermediate:** having the knowledge or skill of someone who is more advanced than a beginner but not yet an expert, i.e. having taken some college/university courses; having regular discussions among colleagues, friends or family

**Advanced:** understanding the principles at a higher, more difficult level, i.e. using the required skills in one's career or as a volunteer

Describe other knowledge, skills or experience that you feel you will bring to the board:

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