

# Board of Directors Application

The following positions are available for 2017-2019: So Cal Healthcare Industry Representative, Region 2 Representative, and Region 5 Representative. This form must be uploaded by February 24, 2017.

## Part 1: Applicant Information

Name: \_\_\_\_\_ School/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

## Part 2: Applicant Qualifications – check all that apply

- I have been a HOSA Advisor or industry partner for at least two years.
- I am an active current Cal-HOSA Member in good standing.
- I hold a CTE credential and teach the CTE course for academy/pathway.
- My administrator/supervisor approves and supports my decision in seeking this position.
- I am willing to serve on at least one committee.
- I am able to attend a minimum of two Board of Directors Meetings per year, which are the 3-day planning meeting and the State Leadership Conference Board Meeting. I am also willing to participate in electronic meetings as necessary.
- I agree to exercise responsibility and initiative as a Board of Directors member and commit to achieving the mission and philosophy of Cal-HOSA.
- I have attached an applicant statement including my goals for service on the Board of Directors. Please include an overview of the skills and experiences you will bring to the Board and how they will assist in development of Cal-HOSA's Mission.
- I will be prepared with a three minute candidate speech to be delivered at the Cal-HOSA Inc. Business Meeting held at the Annual SLC.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Administrator/Supervisor

\_\_\_\_\_  
Date