

**Northern Neighbours
Nurse Practitioner-Led Clinic**

**Clinique dirigée par du personnel
infirmier praticien Northern Neighbours**

P.O. Box 278, 102 Winnipeg St.
White River, ON P0M 3G0

P.O. Box 278, 102, rue Winnipeg
White River, ON P0M 3G0

Tel: (807) 822-2320 Fax: (807)822-2686 Téléphone: (807) 822-2320 Fax: (807)822-2686

Board of Directors Application Form

Name: _____

Address: _____

Phone: _____ Best time to contact: _____

Email: _____

Please ensure the following items are submitted for the Nominations Process:

- Completed Nominations Form; with signed Declaration of Nomination (this form)
- Resume or Curriculum Vitae
- If applicable, proof of registration in professional body (CNO License Number)
- Two (2) professional references that will be contacted at the discretion of the board

Please answer all of the following questions:

1. *Why are you interested in serving on the Northern Neighbours Nurse Practitioner-Led Clinic's Board of Directors?*

2. *What skills and or experience do you bring to the NNNPLC that would add value for the Board Director position you are applying for?*

3. *Is there anything else you would like to tell us that may be relevant to your application?*