



Application to serve as Director of the Board of Nipigon District Memorial Hospital

Applications are being accepted from interested member of our communities to fill vacancies as they arise. A strong desire to advance health system performance and to promote safe, quality health care - are candidate attributes.

The Board is comprised of 7 Directors. Regular meetings of the Board are held on a monthly basis excluding the months of December, July and August.

Please complete the following application and submit to:

Executive Assistant,
Nipigon District Memorial Hospital
Box 37, Nipigon, ON P0T 2J0
admin@ndmh.ca

First Name: _____ Last Name: _____

Home Address: _____

Phone: _____ Email Address: _____

1. Educational Background *Please indicate institution attended, degree or credentials attained and year of completion.*

2. Professional and Employment Background Please provide a chronology of all relevant work experience starting with the most recent. Indicate employer, your title/position, the dates you held the position and a summary of your responsibilities.

3. Community Involvement Please include the name of the organization served, your position and the dates you were involved.

4. Memberships in professional organizations (if applicable)

5. Additional information *State experience which will support your ability to serve effectively as a member of the Board of Directors of Nipigon Hospital.*

6. References *Please provide the names and contact information for two persons who could provide a reference for you. Include name, occupation, address and phone number.*

Signature: _____

Date: _____