

**ACMP Ontario Chapter Board of Directors – Nomination Form**

Thank you for your interest in nominating a candidate for the ACMP Ontario Chapter Board of Directors 2023 Elections. All fields below must be completed to be considered by the ACMP Ontario Chapter Nominations Committee.

**Nominations will close at 11:59PM Eastern Daylight Time on Monday June 19, 2023**

For a profile of the ideal ACMP Ontario Chapter Board candidate, including roles and responsibilities, please refer to the ACMP Ontario Chapter Elections – Board of Director Position Descriptions Final 2023 document, included with the Call for Nominations.

When submitting a nomination, please attach the following:

1. Your Nomination Form completed and signed
2. Your professional bio to a limit of 350 words
3. A photo of yourself

To confirm your intention to run for a position on the Board, please complete and return all the required information no later than **Monday June 19, 2023** at 11:59 p.m. EDT, to [communications@acmpontario.org](mailto:communications@acmpontario.org).

Your submission will be acknowledged by return e-mail. A member of the Nominations Committee may contact you to discuss the nominations process and clarify any missing information.

**Strategic Governance and Leadership**

**ACMP Ontario Chapter Vision**

Leading the way change works

**ACMP Ontario Chapter Mission**

The ACMP serves as an independent and trusted source of professional excellence, advocates for the discipline and creates a thriving change community.

**Strategic Priorities**

* **People –** Building relationships
* **Governance –** Solidifying our presence
* **Process –** Hosting quality events and advancing partnerships
* **Technology –** Streamlining collaboration tools

# Commitment to Serve

**STRATEGIC LEADERSHIP QUALITIES**

The ACMP Ontario Chapter Board Directors have a consistent focus on the ACMP Ontario Chapter and ACMP Global's long-term impacts, results, purposes, and opportunities that serve the needs of members and the profession. Directors embody excellence in governance through a disciplined approach, adhering to the highest standard of ethical conduct in all aspects of guidance, decision-making and leadership of the chapter. Directors play a key resource role in ensuring the policies, procedures and communications reflect and support the ACMP Ontario Chapter’s and ACMP Global's vision and mission.

Ideal nominees will have experience in organizational governance and leadership and demonstrated success in policy and strategy development and execution. Nominees should have experience in collective decision making after encouraging and considering diverse viewpoints and experience evaluating and impacting organizational performance in terms of measurable strategic results. Nominees should clearly understand the distinction and have respect for board, volunteer, and management roles.

**TIME COMMITMENT**

The ACMP Ontario Chapter Board Directors serve a one or two-year term beginning July 3, 2023 and ending July 3, 2023/2024. The following positions are accepting nominations:

* Vice-President (two-year term)
* Treasurer (one-year term)
* Provincial Director, Digital Communications (one-year term)
* Provincial Director, Partnerships and Sponsorships (one-year term)

Board positions typically require a minimum commitment of five (5) hours per week which includes Board and Committee meetings held virtually. In addition, the Board meets twice annually for a half day strategic planning workshop requiring full Board participation.

Board Directors also attend quarterly member meetings (one being designated the Annual General Meeting) and other occasional events as required for presentations, public relations, etc. Time estimates do not include any necessary prep time required for the noted meetings and are subject to change at the discretion of the Board.

# Nominee Information

Please indicate if you are nominating another individual or nominating yourself. If you are nominating another individual, consult with the nominee as many of the questions require his or her direct input and the form must be signed off by both you and the nominee.

1. □ Self-nominating □ Nominating someone other than myself

**What position(s) are you nominating this individual or yourself for?**

|  |  |
| --- | --- |
| **1** |  |
| **2** |  |
| **3** |  |

* Where a nominee is nominated for more than one position, the votes are considered in the order of the position elected until the nominee is successful. Once the nominee is successfully elected, all subsequent votes are null and void.
* **Election votes will be reviewed in the following order:**
  + President
  + Vice President
  + Director, Marketing & Digital Communications
  + Director, Partnerships & Sponsorships

**Nominee Contact Information:**

|  |  |
| --- | --- |
| Nominee’s First Name \* |  |
| Nominee’s Last Name \* |  |
| Suffix |  |
| Nominee’s Title |  |
| Nominee’s Company / Employer Name |  |
| Nominee’s Address 1 \* |  |
| Nominee’s Address 2 |  |
| City \* |  |
| Province \* |  |
| Postal Code \* |  |
| Nominee’s Email Address \* |  |
| Nominee’s Preferred Contact Phone Number \* |  |

**\*** Indicates Response Required

# Nominee Candidacy Eligibility

Is the nominee a member of ACMP and the ACMP Ontario Chapter? \*

□ Yes □ No

Is the nominee a resident of Canada over the age of 19? \*

□ Yes □ No

Has the nominee been an employee, or the spouse, dependent or immediate family member of an employee of ACMP during the past three years? \*

□ Yes □ No

Has the nominee been in a conflict-of-interest position with respect to ACMP Global and/or the Chapter? \*

□ Yes □ No

Is the nominee an undischarged bankrupt or has the nominee committed offences related to fraud? \*

□ Yes □ No

\* Indicates Response Required

**Nominee Bio Information and Interview Availability**

1. Please describe how you would contribute to the ACMP Ontario Chapter Vision and Mission. *Should the nominee be selected as a candidate to stand for election, this response may be included on the ballot next to his or her name*.

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1. Please provide a professional bio with 350-word limit. *Should the nominee be selected as a candidate to stand for election, this bio will be included on the ballot next to his or her name.*

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1. Please attach a photo of the nominee. *Should the nominee be selected as a candidate to stand for election, this photo will be included on the ballot next to his or her name.*

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1. The ACMP Ontario Chapter Nominations Committee may conduct thirty (30) minute telephone interviews with candidates between **June 12-16, 2023**. Please identify three dates / times during the above time frame that the nominee is available for the interview.

|  |  |
| --- | --- |
| **DATE** | **TIME** |
|  |  |
|  |  |
|  |  |

**Nominee Declaration**

By signing and submitting this form to the ACMP Ontario Chapter Nominations Committee, the undersigned declares, and certifies, the following as true and correct as of the date this form is signed:

1. I am a member of ACMP and the ACMP Ontario Chapter.
2. I am 19 years of age or older and am a resident of Canada.
3. I am not an employee of ACMP nor am I the spouse, dependent or member of an ACMP employee’s immediate family.
4. I am not aware of any conflict of interest, or any potential conflict, between my personal interests and those of ACMP Global or the Ontario Chapter.
5. I am not an undischarged bankrupt nor have I committed offences related to fraud.
6. If running for Vice-President, I have held a previous term as a Board Director on the ACMP Ontario Chapter for a minimum of six (6) months.

I accept to run for the Board of Directors of the ACMP Ontario Chapter for the 2022 Elections.

|  |  |
| --- | --- |
| **Name** |  |
| **Signature** |  |
| **Date** |  |

**Nominator Declaration *(if applicable)***

**If you are nominating someone other than yourself, please provide your contact information:**

|  |  |
| --- | --- |
| First Name \* |  |
| Last Name \* |  |
| Suffix |  |
| Title |  |
| Company / Employer Name |  |
| Address 1 \* |  |
| Address 2 |  |
| City \* |  |
| Province \* |  |
| Postal Code \* |  |
| Email Address \* |  |
| Preferred Contact Phone Number \* |  |

**\*** Indicates Response Required

Nominator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_