



## **CACCN BOARD OF DIRECTORS NOMINATIONS**

### **INFORMATION REQUIRED FOR APPLICATION**

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1. Nominations are accepted via the **online application only**.
2. Members must sign in with their username (email address) and password. If you have forgotten your password please use Password Reset (reset the password, clear your browser, log into the system)
3. Please read the nomination requirements prior to completing the online application.
4. Applications may be saved and edited up to the deadline. Submitted applications cannot be edited after submission.
5. An email acceptance will be received after submitting your nomination. If you do not receive the mail acceptance, contact CACCN National Office at [caccn@caccn.ca](mailto:caccn@caccn.ca) to ensure your application processed.

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### **ONLINE APPLICATION**

**LINK:** <https://www.xcdsystem.com/caccn/forms/index.cfm?ID=W3A5JG1>

The following information will be requested when submitting your nomination:

- 1. Applying for:**
  - a. Director – X Region
- 2. Consent and Acknowledgement:**
  - a. I hereby acknowledge and give my consent as a Nominee for the CACCN Board of Directors Election. I acknowledge that I have reviewed the Nomination Package.
- 3. Personal Information:**
  - a. Name
  - b. Credentials (BScN, RN, CNCC(C))
  - c. Address
  - d. Email address
- 4. Employment Information:**
  - a. Employer name and address
  - b. Current position
- 5. Nominator Information:**
  - a. Name
  - b. Email address email
- 6. Nominator Form:**
  - a. The form must include the signature of the nominator **and** the nominee

- b. Upload the nomination form.
  - c. Acceptable file formats : doc, docx, pdf, jpg
7. **Tell us why you are seeking a Board of Director position** (max 100 words):  
Questions to consider when responding:
- a. What contributions can I or do I hope to make to the Association?
  - b. What do I hope to achieve with my board colleagues?
  - c. What is my motivation for seeking a board position?
8. **CACCN Involvement (current/past):**
- a. Tell us about your current/previous CACCN involvement.
  - b. List information such as:
    - i. Board of Director Experience: if you are currently on or have previously been on the CACCN Board of Directors.
    - ii. Chapter Leadership Experience: tell us about your chapter activities.
    - iii. Committee Involvement: tell us if you have worked on any CACCN committees.
    - iv. Partner Liaison Involvement: tell us if you have represented CACCN on any committees outside of the Association (i.e. Cdn Blood Services, CNA, etc.).
    - v. If you do not have any prior experience at the board, chapter, committee levels, please advise of any volunteer experience you might have outside of CACCN.
9. **Personal Statement** (Maximum 500 words, in MS Word doc., docx. format)
- a. This statement is your introduction to the membership – endeavour to represent your personality, interests, enthusiasm accurately.
  - b. Ensure the statement is positive in terms of the contribution you wish to make (refrain from statements, that may negatively reflect on past and current board decisions/operations, such as “the CACCN doesn’t do “this” so I am joining the board to make that happen”, etc.)
  - c. Candidates are invited to consider the following suggestions when drafting the Personal Statement:
    - i. Prepare the statement in ‘first’ person (i.e. I did this, I support this/that)
    - ii. Consider including information detailing the following:
      - 1. Background including education
      - 2. Relevant work experience
      - 3. Why you are standing for election
      - 4. What you hope to achieve as a Director
    - iii. Clearly identify your qualifications as related to the Board of Directors
10. **Curriculum Vitae or Resume** (MS Word doc., docx or PDF)
- a. Upload your current CV or Resume
11. **Photo** (high resolution, .jpg or .png format)
- a. Upload a current photo
  - b. The photo must be:
    - i. Head Shot (preferred)
    - ii. High Resolution
    - iii. Size: minimum 2” x 2”