



BC Association of Healthcare Auxiliaries

Helping Healthcare the Auxiliary Way

British Columbia Association of Healthcare Auxiliaries

"Helping Healthcare the Auxiliary way"

CALL FOR NOMINATIONS

February 22nd, 2024

Greetings to all Member Auxiliaries!

Each year we notify our member Auxiliaries at least 60 days in advance of the Annual General Meeting that an election of officers will take place at the AGM. The meeting is scheduled for Monday, April 22nd, 2024 at The Coast Kamloops Hotel & Conference Centre in Kamloops, B.C.

The BCAHA Board of Directors consists of 14 members, President, Vice-President, Secretary, Director of Communications, Director of Finance, Past President (these six Directors form the Executive Committee), and six Area Directors.

All Executive positions with the exception of Past President are open for nominations from qualified candidates. **Deadline for receipt of Nominations is March 22nd, 2024**



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Nomination Criteria: An overview of the qualification requirements is attached.

Each nomination must include the following:

1. A nomination form from the home Auxiliary of the nominee.
2. A brief summary of the nominee's Auxiliary experience and qualifications.
3. Consent form duly signed by the nominee.

In accordance with article 5.12.2 of the Policies and Procedures of the British Columbia Association of Healthcare Auxiliaries, eligibility is defined as follows:

Eligibility

5.12.2 To be eligible for nomination, elected, appointed or to continue to serve as a Director, a person must be a member in good standing of a member auxiliary and have the required skills and experience to fulfill the position.

A nominee for the position of president shall have held a Director position on the BCAHA Board.

Please send nominations to the Past President, Diane Thornton email lgillott@telex.net by hard copy to:

Diane Thornton

5734 184B Street, Surrey, B.C. V3S 7E3

Warm Regards,



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Diane Thornton

BCAHA Past President, Chair of Nominations, 2024

NOMINATION FORM

The _____ Auxiliary is pleased to nominate

_____ for the position of _____

(Signed: President)

(Date)

Resume of the nominee is attached.



CONSENT FORM

I, _____ of the _____

_____ Auxiliary consent to allow my name to be

placed in nomination for the position of _____ of the British

Columbia Association of Healthcare Auxiliaries for the 2021-2022 term.

Signed _____



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Date _____