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| NORTHWEST COMMUNITY EMS SYSTEM **ADVISORY BOARD APPLICATION – 2023** |

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| **Name:**  (Please PRINT) | **Agency/**  **hospital**: |
| **Current position**  (Include rank if appl.): | **Years in profession:**  **Years in the NWC EMSS:** |
| **Phone #:** | **e-mail address:** |
| **Appointed POSITION – Openings (Check one)**  Associate Hospital Administrator  Alternate (1 opening)  Associate Hospital EMS Physician  Alternate (1 opening)  Associate Hospital EMS Coordinator  Member (1 opening)  Chief  Alternate (1 opening) | |
| **Elected BOARD POSITION DESIRED**: (Check one)  Paramedic non-officer  Member (3 openings)  Alternate (3 openings)  ECRN:  Alternate (1 opening)  Law enforcement  Alternate (1 opening)  Emergency Medical Dispatcher:  Alternate (1 opening) | |

**Give a brief description of your experience in, and contributions to your profession and why you are applying for Board membership**. (If you need additional space, use the back of this form.)

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| **Statement of Intent**:  I am applying to be a member/alternate of the NWC EMS System Advisory Board and agree to fulfill all obligations and commitments stated in the Board's By-Laws. I understand the expectations of Board membership and agree to attend meetings and represent my constituencies to the best of my ability.    Signature of Applicant Date |

**Return completed application to the NWC EMSS Office by January 11, 2023.** May drop off, fax, scan and send electronically or put into the mail. Fax: 847-618-4489 or send to [cmattera@nch.org](mailto:cmattera@nch.org)

THANKS for your willingness to serve in our shared leadership process!