CSHP Saskatchewan Branch Volunteer Application Form

Once complete, please submit this form by email to: president.sk@cshp.ca

|  |  |
| --- | --- |
| Name of Applicant: |   [ ]  CSHP Member/Supporter (check) |
| Job Title |       |
| Site of Employment |        |
|  |  |
| Phone  |        |
| Email |        |
|  |  |
| Signature of Applicant:  |       Date:        |
| Name of Nominator:  |  [ ]  CSHP Member/Supporter (check) |
|  |  |
| Phone  |   |
| Email |   |
| Signature of Nominator:  |       Date:        |

Please indicate which position(s) you are interested in (may select more than one):
Council Members\* Non-council Members

[ ]  President Elect [ ]  Fundraising Coordinator
[ ]  Treasurer [ ]  Awards Committee member
[ ]  Secretary [ ]  Communications/PAM Committee member

[ ]  Branch Delegate [ ]  PostScript Editor(s)

[ ]  Awards Chair [ ]  Educational Services Committee member

[ ]  Communications Chair(s) [ ]  PAS Conference Committee CSHP Rep

[ ]  Educational Services Chair(s) [ ]  Banff Seminar SK Rep

[ ]  Small Hospitals Representative(s) [ ]  Finance Committee member
[ ]  Advocacy Representative

[ ]  PAS Liaison

[ ]  Pharmacy Technician Representative

\**All council positions are 2 years minimum, 6 years max (except President Elect which is 3 years)*

When you are available?

[ ]  Immediately [ ]  After this date:       .

Please describe specific skills and/or previous experience that make you a suitable candidate:

***[More information may be attached – electronic format (e.g. Microsoft Word) preferred]***