

Expression of Interest for Committee - Members Only

PANB depends upon its members to serve on committees; please return the completed form to the office. Applicants will be notified when vacancies are available. Applications will be considered only once all parts are completed.

## A. Member information:

Name:	ID Number:
Employ	<i>y</i> er:
Email:	Phone: Cell phone:
Addres	s: Postal Code:
1.	PANB has a wide range of committees that require member presence. Please check all the committees you are interested in participating within. We reserve the right to limit each member to one committee per term. One term is deemed to be a period of two years.
2.	Complaints Honours & Awards Public Relations Policy Review Committee Discipline & Fitness to Practice
3.	Why would you like to work on this PANB committee?
4.	What could you offer to this PANB committee if you were to be awarded a position?

B. Education & Employer Infor	mation:	
Year Graduated: Prog	ram:	Institution:
Employer:		
How Many Years with Current	Employer?	
Previous EMS Employers:		
Sector: ANB Industrial_	Fire	_ Educational Other_
Current Service Location: Urba	n Rural	Interprovincial
Experience on Boards or Comn	nittees:	
Other Delevent Evnerience i e	. Instructor stat	tua valuntaar warki
Other Relevant Experience, i.e.	. ITISH UCLOF Stat	tus, volunteer work.
•		es we may contact via phone and or email; this person regards to your character and work ethic. All
information gathered in this p	•	y confidential and will not be disclosed outside of the
Board of Directors.		
Name:	Telephone	:: Email:
Name:	Telephone	: Email:
D. Please sign and date the fo	m to validate i	t.
(If you send by email, your email addre	ess will suffice.)	
The purpose of this docume	nt is to allow	Signature Date the Board of Directors to gain some information

The purpose of this document is to allow the Board of Directors to gain some information about each applicant and choose the best suited applicants for each committee. Applications will be considered when vacancies occur and or when terms of service approach completion.

All applicants will be contacted directly once their name has been chosen by the Board of Directors to confirm their interest to serve on the chosen committee and ensure applicants are comfortable with the role they will be serving within the committee.

Please return this form to the Association by email to <u>tim.stairs@panb.ca</u> or by mail to Paramedic Association New Brunswick, 298 Main Street, Fredericton, NB E3A 1C9.

Thank you for your interest in serving your profession.