## ONA MEMBERS' EXPRESSION OF INTEREST FORM



## **Area of Interest: Provincial Committees**

(one representative per region)

The Ontario Nurses' Association builds strong activism and advocacy efforts by developing leaders at all levels to engage members in collective action. This vital work keeps our union strong at the Provincial, Local and Bargaining Unit levels. We invite you to join with us in improving the quality of work-life for all members, to enable us to provide quality health care.

## **Provincial Human Rights and Equity (HRE) Team**

The team's mandate is to promote ONA as an inclusive and equitable organization, and to improve work environments free

		, and bullying and design lescent, disabilities, Fran		_		•
Self-designation of HRI	Group:	☐ Indigenous Descent	□ Disabilities	☐Francophone	☐ LGBTQI2S	☐Racialized
☐ I'm Interested.	Why?					
The equal treatment of c are core tenets of our ur action against racial dis	y with Bla our memb nion. ONA criminations sues of rac	ck and Indigenous commers, and the freedom fromers, and the freedom fromers priority is to continue to the first pour to join the first and anti-Black racism	n any forms of rac o take proactive s the Anti-Racism N n. Team member	ism, discrimination teps in the short- ar ⁄lember Advisory To	and harassment nd long-term to a eam to assist Ol	in the workplace address and take
•						
The LEAP Advisory Team a Board appointment fr	n's manda om Expre	e <b>Assistance Plan (I</b> te is to review and report ssions of Interest.	on the operation	s of the plan. This is	·	
	promote ions for e rest.	T <b>eam</b> s the profession, and eng vents that celebrate Nurs	ing Week. This is a	a one-year term ma	de through a Bo	ard appointment

## Provincial Coordinator Meetings (PCM)/Biennial Design Members on the Design Team are selected for a two-year term by Local Coordinators at the October Area Coordinators Conference from Expressions of Interest. This is a creative opportunity to provide member input into the development of our Provincial Coordinators Meetings and our Biennial Convention. $\square$ I'm Interested. Why?\_\_\_\_\_ **Provincial Elections Team** The Elections Team meets and discusses each year's election process (as applicable) and may make recommendations to the Board of Directors. This team is elected/selected for a three-year term by Local Coordinators at the October Area Coordinators Conference for each region from Expressions of Interest. ☐ I'm Interested. Why?\_\_\_\_\_ **Provincial Complaints Panel** This panel is chaired by a past Board member. The work of the panel is to deal with any issues regarding member discipline. Panel members are appointed by the Board for three years from Expressions of Interest. ☐ I'm Interested. Why?\_\_\_\_\_ City \_\_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_ Email \_\_\_\_\_ ONA ID \_\_\_ \_\_\_\_\_ Local \_\_\_\_\_ Bargaining Unit \_\_\_\_\_ **Sector:** ☐ Hospital ☐ Long-Term Care ☐ Community ☐ Local Health Integration Network ☐ Public Health ☐ Home Care ☐ Clinic ☐ Industry **Status:** ☐ Full-time ☐ Part-time ☐ Casual Professional Designation: ☐ RN ☐ RPN ☐ NP ☐ Health-care Professional (Please identify)

Please send your completed form to EOIForms@ona.org. For more information, visit www.ona.org/eoi

Date submitted \_\_\_\_\_

ONA experience/background: \_\_\_\_\_

Current area of practice: \_\_\_\_\_