



Nomination Process for At-Large Declared Director

The Ontario AIDS Network is committed to ensuring that people with HIV/AIDS have a strong voice in governing the organization. In accordance with the provisions of OAN By-Law #5, a majority of the Board of Directors must be people who are openly HIV+.

Candidates seeking to fill a PHA designated position must be open about being HIV+. *If you do not want to publicly disclose your status, please apply for a Non-Designated At-Large or Regional position which does not require disclosure.*

In addition to promoting PHA inclusion the OAN is also committed to ensuring the diversity of the Board reflects the community of people living with HIV/AIDS in Ontario to the greatest extent possible and supports regional representation and accountability.

The Board of Directors meets three times each year in person and holds regular teleconferences throughout the year. In order to participate, you will need to have access to a telephone for monthly evening teleconferences of approximately 1.5 hours. You will also need an email address and access to a printer to obtain Board Materials in advance. There are also several committees that meet during the year. Board members are expected to attend meetings and participate by serving on committees.

To run for this position you must:

- Be willing to serve for a 3-year Board term from September, 2018 until the Annual General Meeting in June, 2021.
- Agree to comply with the Standard of Care that is required of you as a Director.
- Every Director and Officer of the Ontario AIDS Network, in exercising his or her powers and discharging his or her duties, shall:
 - Act honestly and in good faith with a view to the best interests of the corporation;
 - Exercise the care, diligence and skill that a reasonably prudent person would exercise in comparable circumstances;
 - Comply with all relevant legislation, the letters patent, by-laws and OAN policies including anti-bullying and anti-harassment and confidentiality agreements
- Be a voting representative or non-voting participant appointed by a Regular Member of the Ontario AIDS Network
- Complete an OAN nomination form. A nomination form and list of the membership can be found on the OAN web site at www.oan.red
- Be endorsed by any two (2) Regular Members in good standing of the Ontario AIDS Network. **Signatures must be from an authorized signing authority of the agency such as the Board Chair or the Executive Director.**
- The nominations will be reviewed by the membership of the OAN PHA Body on the morning of Saturday, June 16, 2018. The OAN By-Law #5 defines the PHA Body as "a meeting of the HIV positive Voting Representatives of Regular Members, HIV positive non-voting participants appointed by Regular members (limit of one non-voting HIV positive participant per member), and the HIV positive Directors of the Corporation for the purposes of (i) considering and recommending HIV positive candidates for election to the Board and (ii) providing an opportunity to meet on an annual basis prior to the annual Members' meeting to consider issues of importance to bring to the attention of the Members."
- Candidates endorsed by the PHA Body will be brought forward for consideration by the OAN Membership for election at the Annual General Meeting of the Ontario AIDS Network on Saturday, June 16, 2018.

If you are interested in serving on the Board as the At-Large Declared Director, please complete the nomination form below and ensure that it is received (as a pdf or by mail) no later than 5:00 p.m. **July 3, 2018** to:

Chair, Governance Committee

governance@oan.red

Ontario AIDS Network

296 Jarvis Street, Unit #5

Revised June 11th, 2018

Thank you for considering this commitment to our governance and leadership.



Nomination Form for At-Large Declared Director

The term of office for this position is from September 2018 until the AGM in June, 2021.

Contact Information

Name	
Street Address	
City, Province, Postal Code	
Home Phone	
Other Phone	
Fax Number	
E-Mail Address	

1. What do you want to contribute to the Ontario AIDS Network by serving on the Board?

2. What do you hope to gain from serving on the Board?

3. What area of activities are you interested in?

- Fundraising
- To influence public policy/Advocacy
- Finance
- Governance
- Communication/Marketing
- Other

4. What special skills or qualifications have you gained from employment, previous volunteer work, hobbies or other activities?

5. Please list any positions that you have held on any other Boards of Directors

6. Are there currently or have there ever been any sanctions or complaints brought against you to a member agency or affiliate of the Ontario AIDS Network? If so, how have these complaints been resolved?

Nominations for this position must be **endorsed by two (2) regular members in good standing from the Ontario AIDS Network. Signatures must be from an authorized signing authority of the agency such as the Board Chair or the Executive Director.** Please include the endorsements with this nomination form.

The Ontario AIDS Network membership is as follows:

2-Spirited People of the 1 st Nations	Action positive VIH/sida
AIDS Committee of Toronto	Africans in Partnership Against AIDS
Asian Community AIDS Services	Alliance for South Asian AIDS Prevention
CATIE	Black Coalition for AIDS Prevention
Fife House Foundation	Oahas
Hemophilia Ontario	The Teresa Group
PASAN	AIDS Committee of Cambridge, Kitchener, Waterloo & Area
Toronto PWA Foundation	HIV/AIDS Resources & Community Health
AIDS Committee of Windsor	Positive Living Niagara
Regional HIV/AIDS Connection	Peel HIV/AIDS Network
The AIDS Network	AIDS Committee of Ottawa
AIDS Committee of Durham Region	AIDS Committee of York Region
Gilbert Centre for Social & Support Services	HIV/AIDS Regional Services
Bruce House	AIDS Committee of North Bay & Area
Peterborough AIDS Resource Network	Réseau ACCESS Network
Elevate NWO	

Endorsement from authorized signing authorities (such as Board Chairs or Executive Directors) of 2 regular member agencies of the Ontario AIDS Network.

1. The _____ endorses the nomination of _____ for the position of At-Large Declared Director.

Name: _____ **Signature:** _____

2. The _____ endorses the nomination of _____ for the position of At-Large Declared Director.

Name: _____ **Signature:** _____

Please endorse your nomination form as follows:

I _____ (legal name) declare that I meet the criteria to be an At-Large Declared Director of the Ontario AIDS Network. I agree to serve as a Director of the Ontario AIDS Network in accordance with its by-law if elected.

Signature: _____ **Date:** _____