

## NOMINATION PAPER FOR THE **2024 NZNO BOARD LEADERSHIP ELECTION**

### **SECTION ONE**

CANDIDATE	Е ТО СС	MPLETE				
Candidate's Ful	l Name:					
Address:						
Home Phone:				Mobile Phone:		
Email:						
Membership N	umber:					
I consent to th	e nomina	tion for the follow	wing position:			
Preside	ent		Vice Presiden	t		
Candidate's Sign	nature:				Date:	
Candi to <b>cor</b> knowl photo	dates need <b>nplete sed</b> ledge criter o.	I to ensure that thei tions 3, 4 and 5, of it ia set out in Schedu	ir nomination is support the attestation for fitne ule Four of the Constitut	ted by a nominator ss to stand for election in support of the	r, seconder and ction, the state heir application	d endorser. Candidates also need ment against the experience and n and the candidate profile and
NOMINATO	R TO C	OMPLETE				
Nominator's Fu	ll Name:					
Address:						
Home Phone:				Mobile Phone:		
Email:						
Membership N	umber:					
Nominator's Signature:					Date:	
SECONDER	то соі	MPLETE				
Seconder's Full	Name:					
Address:						
Home Phone:		<u> </u>		Mobile Phone:		
Email:						
Membership N	umber:					
Seconder's Signature:					Date:	



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### **CONFIRMER OF NZNO ACTIVITY TO COMPLETE**

Candidate's Full Name:			
Has had their involvement in N	ZNO activity confirmed by:		
Regional Council	Te Poari	National College or Section	
Name of confirming Group:			
(the group) confirms the following;	; his nomination has been considered and	regional council/Te Poari/national college or section a duly confirmed by the group	bove
Name of confirming person:			
Confirming person's position:			
Chair	Vice Chair		
Confirming person's Signature:		Date:	

### NOMINATION PAPER FOR THE **2024 NZNO BOARD LEADERSHIP ELECTION**

### **SECTION TWO**

#### NOMINATION DECLARATION FOR ELECTION OF NZNO BOARD OF DIRECTORS LEADERSHIP

Nominator's Full Name:	
Seconder's Full Name:	

In my view this director candidate has the skills and attributes to fulfil the requirements of a position on the Board.

NZNO Constitution: schedule four

The nominating member should consider that the nominee:

- has the ability to be able to complete all tasks expected of a director
- has an adequate amount of available time to complete the expected tasks
- knows and understands the NZNO structures and how the director's role relates to that of the Board
- is able to identify and manage conflicts of interest
- demonstrates an understanding that they do not have to be the expert at everything but are required to seek the knowledge and expert advice elsewhere
- · demonstrate that they will act in good faith and display reasonable care, diligence and skill
- has skill and experience in all of the required areas.

Signatures required:			
Nominator's Signature:	Date:		
Seconder's Signature:	Date:		

### **SECTION THREE**

### CANDIDATE STATEMENT OF ATTESTATION OF FITNESS TO STAND FOR ELECTION TO NZNO BOARD OF DIRECTORS

I (full name):	I	(full	name):
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as candidate for the office of director, attest that I am not:

- under the age of 18 years old
- an un-discharged bankrupt
- a person who is disqualified from being a director of a company registered under the Companies Act 1955 or the Companies Act
- a person who is mentally disordered within the meaning of the Mental Health Compulsory Assessment and Treatment) Act 1992
- a person who is subject to a property order made under section 30 or section 31 of the Protection of Personal and Property Rights
- a person who is subject to an investigation by the HDC, DHB, New Zealand Nursing Council on any matter relating to my professional practice.

I also declare that I am not subject to any other investigation or aware of any matter relating to me which may bring NZNO or the office of director into disrepute.

Signature required:			
Candidate's Signature:		Date:	

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### **SECTION FOUR**

#### STATEMENT OF EXPERIENCE/SKILLS AGAINST CRITERIA IN SCHEDULE 4, NZNO CONSTITUTION

This information will appear on the NZNO website for members' review.

- It **must** be provided electronically as a Word document.
- It is recommended that the information be structured with the headings shown in the table below.
- The candidate is to outline the level of experience and knowledge in each of the areas.

#### **CRITERIA HEADINGS:**

- Engagement with NZNO and commitment to NZNO's vision
- Understanding of nursing and the wider health sector
- Business and commercial acumen
- Governance
- Finance & legal compliance
- NZNO's commitment to te Tiriti o Waitangi, Tikanga Māori, Matauranga Māori and NZNO's commitment to bicultural values and the role of Te Rūnanga o Aotearoa.

### **SECTION FIVE**

#### **CANDIDATE PROFILE AND PHOTO**

Candidate profiles and photos are collated by the Returning Officer into a profile sheet and forwarded to financial members with their voting documents. This information will also appear in *Kaitiaki Nursing New Zealand* where it may be subject to editing.

- The word limits will be strictly enforced.
- Information **must** be provided electronically as a Word document.
- It is recommended that the information be structured with the headings shown in the table below.
- The candidate statement must be confined to information concerning skill, experience and suitability for the position.
- A recent (i.e. less than one year old) photograph of the candidate only (i.e. not part of a group) must be included.

Photos should be in an electronic, format (scanned at 300 dpi as a jpeg attachment in an email).

Section heading:	Word limit:
Name:	None
Professional Qualifications:	None
Candidate Statement:	Maximum 150 words. Outlining skill, experience and suitability for the position.
Previous relevant experience:	Maximum 50 words.
Declaration of Conflicts of Interest:	None
Method of campaigning or contact:	Maximum 20 words.