



# Community Appointee Application Form

## Part A: Contact information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you identify as Indigenous (defined as First Nations, Inuit or Métis)? Yes No Prefer not to answer

## Part B: Eligibility Requirements

The COTO bylaws indicate that a Professional Committee appointee is eligible to sit on a Committee provided they meet specific criteria. Please review and check all that apply.

I hereby confirm the following:

- I reside in Ontario.
- I have never been a registrant of the College.
- I have no direct or indirect ownership interest in an occupational therapy clinic or practice.
- I have/will complete the College's orientation e-learning module.
- A court or other lawful authority has not made a finding of guilt against me for any provincial or federal offence.
- I am not present nor have been at any time within the past three years preceding the date of application a director, owner, board member, officer, or employee of any national or provincial association or organization that advances the interests of occupational therapists.

## Part C: Committee Competencies

Competencies are the knowledge, skills, and judgement required to perform the role effectively. The list of competencies to sit on a Committee can be found [here](#).

Please describe your knowledge of and experience in the following areas:

	Limited or basic knowledge and experience	Moderate knowledge and experience	Considerable training, knowledge and/or experience
<p><b>Leadership</b> Demonstrates confidence, sound judgment, and the ability to inspire, motivate, and guide others. Skilled in consensus-building, facilitation, and fostering a collaborative leadership approach. Upholds and promotes the values and commitments of COTO.</p>			
<p><b>Board/Governance/Committee experience</b> Demonstrates experience or expertise in governance within the private, public, or non-profit sectors, gained through board or committee service. Understands the distinct roles of the Board and management, as well as the difference between regulatory bodies and professional associations.</p>			
<p><b>Knowledge of Professional and Occupational Regulation</b> Good understanding of the role and mandate of health regulatory Colleges in Ontario, with a focus on public protection. Understands the regulatory framework for various professions, including occupational therapy.</p>			
<p><b>Risk Management</b> Knowledge of risk management principles, with experience in identifying, assessing, and mitigating significant risks that could affect the College's objectives and operations.</p>			
<p><b>Community and Public Relations</b> Recognizes the importance of the public interest in decision-making and is mindful of how decisions are perceived by diverse groups. Fosters inclusive dialogue and engages meaningfully with various communities to ensure decisions reflect diverse perspectives. Recognizes the impact of public perception on decision-making and works to build trust and credibility through open dialogue.</p>			

<p><b>Technological competence</b> Demonstrates proficiency with technology to support the College's operations while upholding standards of security, privacy, and efficiency.</p>			
<p><b>Lived Healthcare Experience</b> Significant personal experience with health challenges, or experience caring for someone and accessing or navigating healthcare services.</p>			
<p><b>Systems Perspective</b> Knowledge of the healthcare system, as well as practice and industry specific understanding. For example, models of care, practice overlap, including diverse experience with, for example, other health professions, healthcare employers and various practice roles.</p>			
<p><b>Writing/Editing</b> Experience in professional and academic writing and editing.</p>			
<p><b>What perspectives, lived experiences, or knowledge would you bring to the Indigenous Insights Advisory Committee, and why is this work important to you?</b></p>			

a. Do you have experience reviewing and/or editing a significant number of documents electronically?

Yes      No

b. Please note that all Committees meet during regular business hours, from Monday to Friday, statutory holidays excepted. Are willing to be available during regular business hours?

Yes      No

c. Please indicate the amount of time per month you feel you can commit to the College.

2-4 hours/month      6-8 hours/month      8-12 hours/month

## Part D: Privacy Notice

The College of Occupational Therapists of Ontario collects, uses, discloses, stores, and retains personal information in compliance with the *Regulated Health Professions Act, 1991*, RHPA Procedural Code, and the *Personal Health Information and Protection Act, 2004*.

The personal information you provide when submitting this nomination application to COTO is being collected and will be used by COTO to assess your qualifications and suitability for the position you apply for as a potential board member.

For more information about COTO's privacy practices, please see the COTO website summarized [privacy policy](#).

## Part E: Equity, Diversity, and Inclusion

The following questions are included to support the College's commitment to equity, diversity, and inclusion. For the purposes of this survey:

- Francophone includes individuals who are proficient in the French language (listening, speaking, reading, and writing) and identify as part of the Francophonie.
- For the purposes of this survey, 2SLGBTQIA+ includes people who identify as two-spirit, lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, and additional sexual orientations and gender identities.
- Racialized persons are people (other than First Nations, Inuit or Métis persons) who are affected by racism or discrimination that may be based on skin colour, origin, religion, language and so forth, regardless of their place of birth or citizenship.
- Persons with a disability are people who have functional conditions of a chronic, long-term, or recurring physical, sensory, mental, developmental, learning, or intellectual nature that affect one or more major life activities.

### Gender: How do you identify?

- Male
- Female
- Non-binary
- Prefer not to answer
- None of the options applies to me. I identify as: \_\_\_\_\_

### Do you consider yourself to be a Francophone?

- Yes
- No
- Prefer not to answer

### Do you identify as a racialized individual?

- Yes
- No
- Prefer not to answer

**Do you identify as a person with a disability?**

- Yes
- No
- Prefer not to answer

**Do you identify as 2SLGBTQ+?**

- Yes
- No
- Prefer not to answer

## **Part F: Resume**

Attach resume

## **Part G: Consent**

- By completing and submitting this application, I consent to my nomination as a candidate to sit on a Committee of the College of Occupational Therapists of Ontario, and affirm that all information and supporting materials, to the best of my knowledge, are complete and accurate. I authorize the College to verify any or all information provided by me to support my application.