

CANDIDATE APPLICATION FORM

CAPA Board of Directors position

ELIGIBILITY:

Thank you for your interest in being a CAPA Board of Director! If you are a Fellow, Associate, or Military CAPA member in good standing, you are eligible to serve as a senior leader of CAPA.

Fellow CAPA members who are also Fellow members of AAPA.

Associate CAPA members who are not Fellow members of the AAPA.

Military CAPA members who are full-time permanent or active-duty military PAs.

CANDIDACY:

There are **three methods** for submitting your candidacy:

- 1. If you wish to submit candidacy without review and possible endorsement from CAPA's Nominating Committee, you must indicate so below next to the correct option and submit your candidate application by **Monday**, **February 17**, **2025**.
- 2. If you would like CAPA's Nominating Committee to review your application with a possibility for endorsement, the deadline to submit your candidate application is **Monday**, **March 3**, **2025**. If you are not endorsed by the Nominating Committee, your candidacy ends at this stage and will not appear on the election ballot.
- 3. If you would like CAPA's Nominating Committee to review your application with a possibility of endorsement but want your candidacy to be reflected on the election ballot whether endorsed or not, the deadline to submit your candidate application is **Monday, March 3, 2025**. If you are not endorsed by the Nominating Committee, the election ballot will reflect that your candidacy was not endorsed by the Nominating Committee.

REQUIREMENTS:

All eligible candidates must submit the following no later than 5:00 PM PST on Monday, March 3, 2025
Candidates who wish to bypass Nominating Committee review must submit by 5:00 PM PST on Monday, February 17, 2025 .
Late submissions will not be considered.
 Completed candidate application Candidate CV or resume Candidate photograph (include Candidate Platform statement

NOTIFICATION:

Upon review of all submissions, a representative of the Nominating Committee will contact all candidates by Friday, April 11, 2025 regarding the next steps.

Completed candidate applications must be emailed to teresa@capanet.org, with the subject line: c/o Nominating Committee.

Should you have questions regarding your candidacy or the election process, you may contact CAPA Executive Director, **Teresa Chien,** at the submission email above or call (714) 427-0321.

Thank you for participating in CAPA's governance process.

SECTION I: GENERAL INFORMATION

All potential candidates must complete this form

A. Method of Candidacy—Please select one option			
	and the second s	on, in addition to being a member	
I wish to be reviewed by the CAPA Nominating	in good standing, candidates for officer positions must have at least one year of CAPA Board or Committee Chair experience		
Committee. If I am not endorsed, I understand that my name will not be on the election ballot.	1.7	d or Committee Chair experience	
I wish to be reviewed by the Nominating Committee.	within the last three years.		
I understand that if I am not endorsed, my name will still appear on the election ballot, but with the	Please list your past CAPA leadership experience below.		
notation "Reviewed by CAPA's Nominating			
Committee but not endorsed."	CAPA BOARD POSITION	NUMBER OF YEARS	
I wish to self-declare my candidacy without review			
from CAPA's Nominating Committee. My name will	CAPA COMMITTEE CHA R SERVICE	NUMBER OF YEARS	
appear on the election ballot with the notation "Not			
reviewed by CAPA's Nominating Committee."			
	DELEGATE TO THE AAPA HOUSE OF DELEGATES	NUMBER OF YEARS	
B. Positions For Which I am Seeking Candidacy:	DELEGATES		
President-Elect Vice President	OTHER	NUMBER OF YEARS	
Treasurer Secretary			
	OTHER	NUMBER OF YEARS	
Director-at-Large			
NAME & SUFFIX STREET ADDRESS CITY STATE ZIP WORK PHONE HOME PHONE	PA and other relevant employment history Completed educational degrees Professional involvement and leadership positions held Awards and honors Community activities G. Platform Statement		
		ase attach a platform statement	
MOBILE PHONE	which addresses how you view the position for which you		
	are applying and what you would like to see		
EMAIL	accomplished during you	ır tenure.	
EWAIL	U Signature		
	H. Signature Please read the following statements, check your answers,		
D. Membership Requirements	and provide your signature as verification.		
All candidates for a CAPA leadership position must be a Fellow,	I have reviewed the position description and time		
Associate, or Military CAPA member in good standing. "In good	commitment of the position for which I am applying.		
standing" is defined as having maintained uninterrupted CAPA			
membership for a minimum of one year, without suspension or other disciplinary mark.	Yes	No	
disciplinary mark.		l time commitments may be	
	reviewed on CAPA's websi		
CAPA MEMBERSH P NUMBER YEARS OF MEMBERSHIP IN CAPA	https://www.capanet.org/c	apa-ieadersnip	
E. Additional Requirements:	I certify that the information	on provided is true and accurate to	
The officer positions at CAPA, i.e. Treasurer, Vice	the best of my knowledge.		
President, etc., require significant knowledge of CAPA, the			
PA profession, and overall governance. Thus, experience in	SIGNATURE	DATE	

SIGNATURE

a prior CAPA leadership position is required.

DATE

Section II: Additional Information for Candidates Reviewed by the Nominating Committee

FOR CANDIDATES WHO WISH TO BE REVIEWED BY THE NOMINATING COMMITTEE, PLEASE ANSWER THE ADDITIONAL QUESTIONS BELOW AND INCLUDE AS PART OF YOUR PLATFORM STATEMENT. CANDIDATES WHO WISH TO BYPASS THE NOMINATING COMMITTEE MAY SKIP THIS SECTION.

A. CAPA GOALS AND DIRECTIONS

On a separate page, please select one area below and discuss how you believe CAPA, and its leaders can progress CAPA toward its *Vision* to fully integrate into every aspect of California's healthcare system by:

- Strengthening and Promoting the PA Profession
- Strengthening Team Practice with Other Health Professions
- Strengthening State Healthcare Systems
- Strengthening CAPA and Grassroots Involvement

B. OTHER QUESTIONS

Please answer 3 of the 5 following questions.

- 1. What do you consider the single most important accomplishment in your PA leadership or employment position?
- 2. What was the biggest decision you made this past year and how did you make that decision?
- 3. What strengths would you bring to the CAPA Board of Directors?
- 4. What are your hobbies and interests?
- 5. How many hours a week do you devote to your job(s) and how many hours a week do you currently devote to volunteer positions/activities?

C. REFERENCES

Please provide the information requested below for three references. One of your references may be contacted via phone for additional information.

REFERENCE 1				
REFERENCE	NAME		R	EFERENCE PHONE NUMBER
REFERENCE E-MAIL ADDRESS		RELATIONSHIP TO REFERENCE		LENGTH OF T ME KNOWN
REFERENCE 2				
REFERENCE	NAME			REFERENCE PHONE NUMBER
REFERENCE E-MAIL ADDRESS		RELATIONSHIP TO REFERENCE		LENGTH OF TIME KNOWN
REFERENCE 3				
REFERENCE N	IAME		F	REFERENCE PHONE NUMBER
REFERENCE E-MAIL ADDRESS		RELATIONSHIP TO REFERENCE		LENGTH OF T ME KNOWN
SUBMISSION CHECKLIST				
Application (Section I-II)			CV/ Resume	Platform Statement
Digital Photograph (.png prefer	rred)			ments (required for those wishing to ne Nominating Committee)

Please email your candidate applications and supplementary materials (in PDF format) to Teresa Chien at teresa@capanet.org, with the subject line: c/o Nominating Committee.

Deadlines:

- Self-Declare Candidates: Monday, February 17, 2025
- Nominating Committee Reviewed Candidates: Monday, March 3, 2025