

**ONslow CHIP (COMMUNITY HEALTH IMPROVEMENT PROCESS)
CITIZEN PARTICIPATION APPLICATION
BOARDS AND/OR COMMITTEES**

If you are an Onslow County resident, at least 18 years of age, and willing to volunteer your time and expertise to your community, please complete this application and return to:

Onslow CHIP
241 New River Drive
Jacksonville, NC 28540

Phone: (910) 557-2238
Fax: (910) 577-2598
Email: onslowchip@yahoo.com

I would like to be considered for an appointment to the Onslow CHIP board _____ (yes/no).
I would like to be considered for an appointment to the Onslow CHIP _____ committee.

Name: _____ Home Address: _____

City/State: _____ Zip: _____ DOB: _____

Category: _____ Education: _____

Please describe background or abilities that qualify you for service on this board:

What boards/committees are you presently serving on, if any? _____

List any boards or committees you have served on in the past: _____

List ANY businesses or corporations of which you are a stakeholder or have a personal interest:

Is ANY family member employed by Onslow CHIP or to an organization affiliated with the board or Committee to which you are seeking membership? _____ If Yes, please list:

Do you have any personal or business interest that could create a conflict (either real or perceived) if appointed? If Yes, please explain:

How did you become aware of Onslow CHIP volunteer opportunities?

(Please check all that apply):

Web Page _____ T.V. _____ (Public Service Channel 10) _____
Newspaper _____ Radio _____ Current Onslow CHIP Volunteer _____
Other: _____

**ETHICS GUIDELINES FOR
ONslow CHIP ADVISORY BOARDS AND/OR COMMITTEES**

I agree by my signature below that, if appointed, I pledge to comply with the following ethics guidelines for Advisory Boards and/or Committees as adopted by Onslow CHIP.

- Members of advisory boards and committee shall not discuss, advocate, or vote on any matter in which they have a conflict or potential conflict of interest or an interest, which reasonably might appear to be in conflict with the concept of fairness in dealing with public business. A conflict of interest or a potential conflict occurs if a member has a separate, private, or monetary interest, either direct or indirect, in any issue or transaction under consideration. Any member who violates this provision may be subject to removal from the board or committee.

- If an advisory board or committee member believes he/she has a conflict or potential conflict of interest on a particular issue, then that member should state this belief to the other members of his/her respective advisory board or committee during the board or committee's public meeting. The member should state the nature of the conflict, detailing that he/she has a separate, private, or monetary interest, either direct or indirect, in the issue or transaction under consideration. The member should then excuse himself/herself from considering and voting on the matter. (In cases where an advisory board or committee member declares a conflict or potential conflict of interest, the member shall excuse himself/herself from the board table/voting area until all discussing, consideration, and voting is completed on the matter in question.

- Any advisory board or committee member having questions or needing assistance regarding the interpretation of these ethnic guidelines or other conflict of interest matters should contact the administrative staff for the respective board or committee. Staff will assist the member with questions and interpretations and may provide a recommendation on whether or not the advisory board or committee member should excuse himself/herself from voting. The member may request that the staff respond in writing. Staff may contact the Executive Director for any additional assistance.

- The members of the Onslow CHIP advisory board and committees shall agree to follow the same Code of Ethics adopted by Onslow CHIP.

If appointed, I agree to attend orientation which will give an overview of how Onslow CHIP operates, its relationship to other federal, state and local agencies and an overview of the board to which I am applying.

Signature

Date

Witness

Date

Please Note:

1. This application is considered a public document.
2. Please complete one application for each board or committee to which you would like to be considered for an appointment.
3. Incomplete applications will **NOT** be considered.
4. You are encouraged to attend and observe meetings of any boards to which you desire appointment. Information about the board or committee's duties, work, and schedule is available upon request.
5. The above information will be used by Onslow CHIP in considering your application for appointment.
6. Information from this form may be used in news releases to identify you if you are appointed.