



2011 Vacancy Appointment Certification

Please complete and return form by July 1, 2011

Name: _____
(please print name as you wish it to appear in NAMI publications and documents)

NAMI membership #: _____
NAMI Affiliation: _____

Preferred mailing address

Street: _____
City: _____ State: _____ ZIP: _____

Job Title: _____
Employer: _____
Describe your work (max 50 words): _____

Please check the phone number you prefer as your primary contact number for NAMI staff and Board members.

- Day time telephone: _____
- Evening telephone: _____
- Cell phone: _____

E-mail: _____

I am interested in service on the NAMI Board and, if appointed, agree to serve on the NAMI national board of directors.

Signed: _____ Date: _____

Board Composition:

To ensure compliance with NAMI's bylaws, 75% of the Board must be "persons who have or have had a lived experience with serious mental illness, or parents or other relatives thereof."

___ I am a person who has had a lived experience of mental illness, or parent or other relative thereof, including civil partners.

___ I do not consider myself to be a person who has had a lived experience of mental illness, or parent or other relative thereof, including civil partners.

Attach a brief statement (max. 50 words) providing what detail you feel is pertinent in explaining how you have identified yourself.

Name: _____

Please respond to the following questions, which have also been posed to recent Board candidates.

- i) What brought you to NAMI and what roles have you played in your NAMI Affiliate and NAMI State Organization?
- ii) What advocacy and organizational priority areas do you believe NAMI should be pursuing in the next three years and how can you help as a Board member?
- iii) Please describe any previous service on a board and what you regard as your greatest contribution to that organization's work through your service on its board.
- iv) How can you contribute to NAMI's evolution as "a dynamic, well-run organization that seeks and engages a diverse and growing membership," as called for in the NAMI strategic plan?
- v) What fund raising, financial oversight, legal, marketing, or information technology expertise do you have to offer to NAMI?

Disclosures: Please initial all statements that apply.

1. NAMI service and engagement:

- a. I am not currently employed by the national organization NAMI. _____
- b. I am currently serving in the following capacities (paid or unpaid) within a NAMI Affiliate and/or NAMI State Organization: _____ (itemized below)

Name of NAMI Affiliate / NAMI State Organization	Role	Check as applies	
		Paid	Unpaid

2. Other board service and engagement:

- a. I am not currently serving on any other boards of directors or trustees. _____
- b. I am currently serving on the following board(s): _____ (itemized below)

Name of Organization	Role	Term

3. Public office:

- a. I am not currently serving in any public/elected office. _____
- b. I am currently serving in the following public/elected office: _____

Name: _____

4. NAMI Conflict of Interest Policy:

Conflicts can arise from many ordinary and appropriate activities; the existence of a conflict does not imply wrong doing on anyone's part. But when conflicts do arise, they must be recognized and disclosed, and then eliminated or appropriately managed. Some relationships may create an appearance of conflict; those too, are important to eliminate or manage so that we may maintain public confidence in the integrity of our activities.

AREAS IN WHICH CONFLICT MAY ARISE: Conflicts of interest may arise in the relations of directors, officers, and management employees with any of the following third parties:

- Persons and firms supplying goods and services to NAMI
- Persons and firms from whom NAMI leases property and equipment
- Persons and firms with whom NAMI is dealing or planning to deal in connection with the gift, purchase or sale of real estate, securities, or other property
- Competing or affinity organizations
- Donors and others supporting NAMI
- Agencies, organizations, and associations that affect the operations of NAMI
- Family members, friends, and other employees

NATURE OF CONFLICTING INTEREST: A material conflicting interest may be defined as an interest, direct or indirect, with any persons and firms mentioned above. Such an interest might arise through

- Owning stock or holding debt or other proprietary interests in any third party dealing with NAMI
- Holding office, serving on the board, participating in management, or being otherwise employed (or formerly employed) in any third party dealing with NAMI.
- Receiving remuneration for services with respect to individual transactions involving NAMI
- Using NAMI's time, personnel, equipment, supplies, or good will for other than NAMI approved activities, programs, and purposes
- Receiving personal gifts or loans from third parties dealing with NAMI. Receipt of any gift is disapproved except gifts of nominal value that could not be refused without discourtesy. No personal gift of money should ever be accepted.

I have received and reviewed NAMI's code of conduct and conflict of interest statement and will make all necessary disclosures and abide by this policy if elected.

Signed: _____ Date: _____

Return completed form by July 1, 2011:

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