



February 2020

Dear NIVAS member,

Elections to the NIVAS Board: Call for nomination of candidate

I am writing to you to ask you to consider standing for election to the NIVAS Board or nominating a friend or colleague to do so. Both you and your nominee must be fully paid up members of NIVAS. There will be **two seats** available.

A nomination paper for this motion is attached and should be returned with your supporting statement to Media1 Productions, as detailed, by **Friday 6th March 2020**. Please note that two Board members will need to agree you're the nomination once it's been submitted.

NIVAS cannot offer remuneration to Board members but travel expenses are of course reimbursed. The Board needs members who are committed to furthering our aims and are willing and able to spend some time helping to run the organisation and especially to help in the implementation of our strategic aims including engaging all healthcare professionals involved in intravenous therapy and/or vascular access organising study days and our annual conferences. Although a lot is achieved by email and phone, we've found it important to hold quarterly face to face meetings with interim teleconferences. It is estimated that NIVAS business takes up approximately 1 day of a Board member's time each month.

Please give some serious thought to standing for election to the Board. We are always looking for enthusiastic members dedicated in promoting intravenous therapy and vascular access. If you want to find out more about what being a Board member entails, please feel free to contact any of the current members of the Board – NIVAS@media1productions.co.uk

Nomination forms must be returned to Media1 Productions by Friday 6th March 2020, along with your supporting statement.

Yours sincerely

A handwritten signature in black ink, appearing to read "Andrew Barton", is positioned above the printed name.

Andrew Barton
NIVAS Chair

NIVAS Secretariat

c/o Media1 Productions

Email: NIVAS@media1productions.co.uk

Website: www.NIVAS.org.uk



NIVAS Board Member Nomination Form 2020

Name of candidate: _____

Job title: _____

Place of work: _____

Work address: _____

E-mail address: _____

Phone number: _____

NIVAS membership number: _____

Please provide a summary of your qualifications, experience in IV therapy/Vascular Access and a description of your current and past leadership experience:

Please tell us why you would like to join the NIVAS Board:



Candidate declaration:

I am currently a fully paid member of NIVAS, live and work in the UK and am willing to abide by the organisation's constitution if elected to the NIVAS Board. My day to day work involves regular involvement in IV therapy and/or vascular access and I have the support of my manager to allow me to attend a minimum of three Board meetings a year (Board meetings are held every three months, sometimes by teleconference) plus the AGM at the Annual Conference or other date to be specified in advance.

_____ (signature)

_____ (date)

Supported by*: _____ (signature)

_____ (name)

_____ (NIVAS membership
number)

*The supporter must be a NIVAS member at the time of the nomination.

*Electronic signatures are acceptable.

This form should be returned to the NIVAS Secretariat
NIVAS@media1productions.co.uk