ELECTIONS 2018

APPLICATION FORM

WPHNA Executive Committee

This is the Application form for the vacant position of **Professional Affairs Secretary** on the WPHNA Executive Committee.

All queries about the position, the election process, or any other relevant matter, should be sent please in good time to secretariat@wphna.org. Please note that the deadline for candidates to send in their applications is **28 February 2018, 23.59 GMT**. For general information about the Association, including members of the EC and the Association’s aims and objectives, please visit [www.wphna.org](http://www.wphna.org) and read the [Call for applications](http://wphna.org/wp-content/uploads/2016/09/2016-Assoc-Elections-Call-for-Candidates-FINAL.pdf).

***1.* Specification of role**

Professional affairs secretary

* Convene the professional affairs committee and appropriate working groups; responsible for professional member certification; responsible for overseeing the professional code of the association; responsible for workforce development and ongoing capacity development in public health nutrition; coordinate joint common activities with other groups to promote workforce development.
* Certification scheme manager.

**2. Desired qualifications**

* Proven leadership in a professional or civil society organisation
* Proven accomplishment in the fields of public health and nutrition
* Proven record of international network building and development
* Proven record for delegating responsibility to colleagues
* Professional experience in at least two continents
* Proven ability to raise funds
* Record of achievement as a member of the Association’s governing body
* Knowledge of or experience in associated fields
* Written and oral fluency in at least two common languages including English
* Sustained record of presentations and publications in the field

See next page for the Application Form.

**3. Application Form**

I hereby apply for the position of Professional Affairs Secretary on the Executive Committee of the World Public Health Nutrition Association. I understand and accept the points made in this and the call for candidates document. I am a paid-up member of the Association at the time of sending this document. I qualify for the position in the terms set out above. I confirm that I can commit the time indicated in the call for candidates. I have no conflicting or competing interests that would disqualify me (see Annex I), and accept that in the event of any disagreement on this point the decision of the Executive Committee is final.

**Name**: Click here to enter text.

**Current employment/position**: Click here to enter text.

**One previous employment/position**: Click here to enter text.

**Email address:** Click here to enter text.

**Date**: Click here to enter a date.

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If I am not elected to the post specified above, I wish to be considered to be co-opted for Deputy to this position.

☐Yes.

☐No

Please now fill in the form that follows. The length of what you write (including the headings in the form) should not exceed 1,000 words. Please complete all the items below as requested. If you do not, your application may be disqualified. Do not attach other information.

**My qualifications:**

Click here to enter text. You can expand the size of this text box as needed.

**My vision for the Association and my role in particular:**

Click here to enter text. You can expand the size of this text box as needed.

**My strengths other than stated above (up to three):**

Click here to enter text. You can expand the size of this text box as needed.

**My weaknesses (up to three):**

Click here to enter text. You can expand the size of this text box as needed.

**My conflicting or competing interests (if none say ‘None’; see Annex I)**

Click here to enter text. You can expand the size of this text box as needed.

**Annex I**

**Conflicting and competing interests**

The Association principles and policies include commitment to ethical practices and transparency. Conflicting or competing interests may or may not be bars to membership of the Executive Committee, but must be declared. The general guide is to disclose any interests that if disclosed by a third party might cause reasonable adverse comment, embarrassment, or other difficulty. If in doubt please include possible interests. These are not only financial. They include:

* Employment by or paid or other substantial association with any food, drink, arms, tobacco or pharmaceutical industry corporation or any representative or associated organisation.
* Membership of or association with any non-profit and charitable organisation whose governing body has more than 25 per cent of its members employed by or associated with any corporation or organisation as indicated above.

Potential conflicting or competing interests include:

* *Employment and other relevant paid activities*

Any current employment, consultancy, directorship, or other including honorary positions or association at any substantial level.

* *Project funding and research grants*

Consultancies, grants or honoraria for or in support of research, support to attend conferences and meetings, or to cover travel and accommodation.

* *Stocks, donations, gifts*

Stockholding, donations, gifts and other benefits that may be relevant.

* *Other interests*

Anything else you would like to disclose.