

Application for NCMS Appointment to NCPHP Board

Thank you for your interest in serving as a North Carolina Medical Society Appointee to the North Carolina Professionals Health Program Board of Directors. Your willingness to serve on the Board is of great value to the public. Expectations of Appointees are outlined below.

Selection Process

The NCMS Board of Directors will select candidates to interview. Following the interviews, the NCMS Board of Directors will appoint a physician to each vacancy. All candidates will be notified in writing about the status of their applications.

Duties of Appointed Physicians

Appointees are expected to:

1. Regularly attend meetings.
2. Prepare for meetings by reading all materials that are distributed in advance.
3. Ask questions to get enough information necessary to make informed decisions.
4. Use your own judgment rather than substituting the judgment of staff or other board members as your own.
5. Act for the benefit of the NCPHP and its participants when making operational and financial decisions.
6. Participate in scheduled meetings with the NCMS Board of Directors and be available for questions from the NCMS Board of Directors and NCMS staff.
7. Balance the public protection role of the NCPHP with licensees' confidentiality and due process rights.
8. Honestly complete the attached Statement of Interest form and execute responsibilities in a manner that neutralizes any potential conflict of interest.
9. Adhere to the NCPHP's confidentiality policy.
10. Understand and support the implementation of standards found in the Memorandum of Understanding between the NCMS and the NCPHP.

Acknowledgement of Duties

I, _____, acknowledge the above duties, and will faithfully work to fulfill those duties if appointed to the NCPHP Board of Directors by the NCMS.

_____, 20____
Signature Date

Return this completed document and any attachments to Evan Simmons at esimmons@ncmedsoc.org.

Statement of Interest

Below, state your interest and motivation to apply for a position as a Director for the North Carolina Professionals Health Program. In addition, each applicant must submit a complete curriculum vitae, including a permanent physical address and contact information together with this form.

Commitment to Serving

I, _____, acknowledge that the term of appointment to the North Carolina Professionals Health Board of Directors is three (3) years, and I commit to serving the entire term.

_____, 20____
Signature Date

Return this completed document and any attachments to Evan Simmons at esimmons@ncmedsoc.org.