



# BC Association of Healthcare Auxiliaries

Helping Healthcare the Auxiliary Way

## CALL FOR NOMINATIONS

February 19, 2026

Greetings to all Member Auxiliaries!

Each year we notify our member Auxiliaries at least 60 days in advance of the Annual General Meeting that an election of officers will take place at the AGM. This year's AGM will be held in Vernon, BC on Monday, April 20, 2026.

The BCAHA Board of Directors consists of 12 members – President, Vice-President, Secretary, Director of Communications, Director of Finance, Past President (these six Directors form the Executive Committee), and six Area Directors.

All Executive positions, with the exception of Past President, are open for nominations from qualified candidates. **Deadline for receipt of Nominations is March 6, 2026.**

**Nomination Criteria:** An overview of the qualification requirements is attached.

**Each nomination must include the following:**

1. A nomination form from the home Auxiliary of the nominee.
2. A brief summary of the nominee's Auxiliary experience and qualifications.
3. Consent form duly signed by the nominee.



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In accordance with article 5.10.2 of the Policies and Procedures of the British Columbia Association of Healthcare Auxiliaries, eligibility is defined as follows:

## **Eligibility**

5.10.2 To be eligible for nomination, elected, appointed or continue to serve as a Director, a person must be a member in good standing of a member auxiliary and have the required skills and experience to fulfill the position.

A detailed job description for each position available upon request at [murraycarole5350@gmail.com](mailto:murraycarole5350@gmail.com)

A nominee for the position of President shall have held a Director position on the BCAHA Board.

Please send nominations to the Past President, Carole Murray [murraycarole5350@gmail.com](mailto:murraycarole5350@gmail.com) or by hard copy to:

Carole Murray  
6354 Baillie Road, Sechelt B.C. V7Z 0N7

Warm regards,

*Carole J. Murray*

BCAHA Past President, Chair of Nominations - 2026



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## NOMINATION FORM

The \_\_\_\_\_ Auxiliary is pleased to nominate

\_\_\_\_\_ for the position of \_\_\_\_\_

\_\_\_\_\_

(Signed: current Auxiliary Member)

(Date)

Resume of the nominee is attached.

## CONSENT FORM

I, \_\_\_\_\_ of the \_\_\_\_\_

\_\_\_\_\_ Auxiliary consent to allow my name to be

placed in nomination for the position of \_\_\_\_\_ for the

British Columbia Association of Healthcare Auxiliaries for the 2026 – 2027 term.

Signed \_\_\_\_\_

Date \_\_\_\_\_