

REQUEST FOR APPOINTMENT (RFA) CHECKLIST

INSTRUCTIONS

- Complete the parts of this checklist that apply to your situation and send it to your ministry appointment co-ordinator and cc the Crown Agencies and Board Resourcing Office (CABRO).

Freedom of Information and Protection of Privacy Act (FOIPPA) – The personal information on this form is collected for the purpose of administering a variety of statutes that authorize the appointment of individuals to public sector organizations under the authority of section 26(a) of the FOIPPA. Questions about the collection or use of this information can be directed to the Crown Agencies and Board Resourcing Office by email at abc@gov.bc.ca or by telephone at 604 660-0465.

PART A – GENERAL INFORMATION

Name of Board or Public Sector Organization:	Name and title of individual and title completing this form:	Date Completed: DD/MM/YYYY
Ministry Responsible:	Governing Legislation:	Type of Appointment: (OIC/MO/ ML/SR, etc.)

PART B – RECOMMENDED REAPPOINTMENTS (due to upcoming expiries)

Member Name (Include first, middle and last name)	Position (Eg. Chair, Vice-Chair, Member, Director, etc.)	Initial Appointment Date (DD/MM/YYYY)	Term Expiry Date (DD/MM/YYYY)	Is the Performance Appraisal (PA) form attached? (Y/N)	Suggested Term
1.					
2.					
3.					
4.					
5.					

PART C – RECOMMENDED RECRUITMENT AND EVALUATION

Describe competencies sought for vacant position(s) and/or reappointments **including: gender, diversity and regional/geographic representation on the Board.**

PART D – VACANCIES (Vacating member due to members not recommended for reappointment, served maximum term, resignations or legislation requirements)

Member Name (Include first, middle and last name of outgoing member)	Position (Eg. Chair, Vice-Chair, Member, Director, etc.)	Current/Upcoming date of vacancy (DD/MM/YYYY)	Is the Notice of Position (NOP) form attached? (Y/N)	Notes (eg. not seeking Reappointment (RE), not recommended for RE, Resignation or Retired)
1.				
2.				
3.				
4.				
5.				

PART E – NEW CANDIDATES FOR APPOINTMENT CONSIDERATION (OPTIONAL)

Candidate Name (Include first, middle and last name)*rank by priority	Position (Eg. Chair, Vice-Chair, Member, Director, etc.)	Is a resume attached? (Y/N)	Is a Candidate Profile and Declaration (CPD) form attached? (Y/N)	Suggested Term
1.				
2.				
3.				
4.				
5.				