

Please complete and email back to Loretta Worthington at lworthington@ph.lacounty.gov by April 15, 2014.

ASTHMA COALITION OF LOS ANGELES COUNTY

Nomination for Steering Committee Member

Name: _____

Organization: _____

Work address: _____

Email address: _____

Telephone number: _____

1. What interests you about being a member of the ACLAC Steering Committee?

2. Describe how you have been active with the ACLAC?

3. What is your current area of employment or community activity? If it is related to asthma prevention/control, in what way?

4. What skills, contacts, and experiences would you bring to the Steering Committee?

5. How would your participation as a Steering Committee member benefit you?

6. Do you have prior experience working on organizational boards or steering committees? If yes, please describe briefly.

7. Do you have any involvement that could potentially pose a conflict of interest with any aspect of the mission, goals, and activities of the ACLAC? If so, please describe.

Please feel free to briefly add any other information you would like the nomination committee to know.