

Please submit your completed application to Mary Kravenas at mkravenas@aha.org by November 12, 2021.

Full Name: _____

Preference on how name will appear in all printed material (if different):

Title: _____

Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Is this: work home

Cell Phone: _____

Email: _____

Is this: work home

Please address the following questions/statements in 150 words or less.

1. Succinctly describe the primary reasons you would like to run for the YPAC.

2. What do you hope to get out of serving on the YPAC?

3. What do you think are the characteristics of a great advisory council member?

4. Do you have autonomy over your schedule?

5. Do you have the time and energy to commit to the challenging but rewarding work of steering the young professionals' initiative in its formative years (in addition to your paid job and any other volunteer activities)?

6. If you are asked to join the YPAC, can you attend monthly meetings, including one face-to-face meeting at the AHRMM Annual Conference? (YPAC members receive discounted conference registration, but all other costs (airfare, hotel) for attending are not covered.)

Please address the following questions/statements in 500 words or less.

7. Share examples from your personal experience that demonstrate leadership qualities, teamwork, project management and strategic thinking skills, and describe why you are a good candidate for this leadership role.

8. Provide 1-2 examples of experience/skills you have that would directly contribute to the YPAC's priorities.

9. AHRMM's mission is to "advance health care through supply chain excellence by providing education, leadership and advocacy to professionals in health care and related organizations that are accountable to the community and committed to health improvement." How will your leadership and vision for the YPAC help to strengthen AHRMM's mission?

CANDIDATE INFORMATION

Background:

Active member of AHRMM for ____ year(s)

Years in health care: _____

Years worked in supply chain: _____

Years worked in the health care supply chain profession: _____

Months/Years in your current position: _____

Number of direct reports (if applicable): _____

Current Position and Responsibilities:

Type of Organization you are employed by:

- | | |
|--|---|
| <input type="checkbox"/> Hospital/Medical Center | <input type="checkbox"/> Consulting Firm |
| <input type="checkbox"/> Integrated Delivery Network (IDN) | <input type="checkbox"/> Military/VA/Government |
| <input type="checkbox"/> Managed Care Organization | <input type="checkbox"/> Distributor |
| <input type="checkbox"/> Group Purchasing Organization | <input type="checkbox"/> Manufacturer |

Organization setting:

- Rural Suburban Urban

In 400 words or less, describe your current position and responsibilities:

Optional but helpful*:

Race:

Ethnicity:

Gender:

*AHRMM seeks to have balanced representation on its national council, therefore, the following criteria will be taken into consideration during the vetting process:

- Area of supply chain expertise
- Health care supply chain experience
- Managerial or leadership experience
- Type of facility/company
- Health care supply chain setting (provider, supplier, consulting, etc.)
- Region
- Race, ethnicity, gender

Educational Background (include degrees, licenses, certifications, credentials)

Degree(s) _____

Certified Materials & Resource Professional (CMRP)? Yes No

AHRMM Fellow (FAHRMM)? Yes No

Other certifications within health care or supply chain: _____

Service (if none, please indicate N/A in each section)

List service to local chapter and to AHRMM national, including all committee/task force involvement, and whether you served as a member or as chair, within the past 5 years.

List annual conferences, leadership training conferences and relevant education/leadership events attended, including general dates and locations, within the past 5 years:

Service to professional associations or community organizations to which you belong, including all committees, whether you served as a member or as chair, the year(s) of service, any elected offices held and the year(s) held:

In 150 words or less, please share anything else you'd like us to know:

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