

ClearWay Minnesota'sSM Mission

ClearWay Minnesota's mission is to enhance life for all Minnesotans by reducing tobacco use and exposure to secondhand smoke through research, action and collaboration.

About the Application

Please complete the application in its entirety to be considered as a candidate for ClearWay Minnesota's Board of Directors.

You can preview the application prior to filling out the electronic form, by downloading a [PDF copy](#) of the application. If you would like to use additional space than is allotted for your answers, feel free to use additional pages and email them to [Amy Henderson](mailto:ahenderson@clearwaymn.org) (ahenderson@clearwaymn.org) once the application is complete.

We are accepting applications for ClearWay Minnesota's Board of Directors through Friday, July 28, 2017. Your application will not be completely submitted until you email [Amy Henderson](mailto:ahenderson@clearwaymn.org) your resume, along with any additional pages used to complete your answers. All application materials must be submitted electronically and via email by 5 p.m. on Friday, July 28, 2017.

Saving the Application

To save your responses while filling out the application, [cookies must be enabled](#) on your computer. This will allow you to fill out the application and navigate between pages without losing your responses. If you close out of the application without submitting it, you will be able to return to the last saved page to edit your original application using the same link, computer and browser. Once you submit the application, you will not be able to revise or revisit your responses.

Please note that there are a few limitations because cookies are used to save your progress when filling out the application, they are:

- Only one person is able to fill out the application per computer.
- Responses are saved by page, rather than by question. You must hit "Next" on every page, in order to save your responses to the questions on that page.
- Saved application responses cannot be accessed on another computer.

Contact [Amy Henderson](mailto:ahenderson@clearwaymn.org) via email or at 952-767-1438 if you have any questions while filling out the application.

PERSONAL CONTACT INFORMATION

Positions with the ClearWay Minnesota Board of Directors are only open to residents of Minnesota. Board Members serve without compensation.

* 1. Please provide your personal contact information.

First & Last Name:

Address Type (Home or Office):

Address:

Address 2:

City/Town:

State:

ZIP code:

Email Address:

Phone: (day)

Phone: (evening)

* 2. How did you find out about the ClearWay Minnesota Board of Directors position? (select all that apply)

Facebook

Twitter

LinkedIn

MinnPost

Print ad

Online ad

ClearWay Minnesota's Website

Personal referral

Other (please specify)

* 3. Are you a Minnesota resident?

Yes

No

* 4. The ClearWay Minnesota Board of Directors meets every other month (beginning in January) on the third Wednesday from 9am-noon and has a strong Committee structure. Please describe how membership on the Board would fit into your schedule. Would you be able to attend ClearWay Minnesota Board meetings regularly and be a fully participating member?

PROFESSIONAL EXPERIENCE

* 5. What is your professional experience and what skills and expertise will you bring to the Board? Please highlight leadership positions you have held. (answer limited to 2,000 characters)

* 6. Describe other Boards you have served on, if any, and positions you have held that demonstrate your ability to govern as a Board Member. (answer limited to 2,000 characters)

EXPERTISE & INTERESTS

Please describe your level of expertise in any of the following areas (select only one answer):

* 7. Finances (including budgeting and investments)

- No experience
- A little experience
- Some experience
- Significant experience

* 8. Communications

- No experience
- A little experience
- Some experience
- Significant experience

* 9. Public Speaking

- No experience
- A little experience
- Some experience
- Significant experience

* 10. Life-Limited Organization

- No experience
- A little experience
- Some experience
- Significant experience

* 11. Organizational Change Management

- No experience
- A little experience
- Some experience
- Significant experience

* 12. Tobacco Control/Cessation

- No experience
- A little experience
- Some experience
- Significant experience

* 13. Community Organizing

- No experience
- A little experience
- Some experience
- Significant experience

* 14. Health Care Services

- No experience
- A little experience
- Some experience
- Significant experience

* 15. Populations at Risk as it relates to Tobacco Use

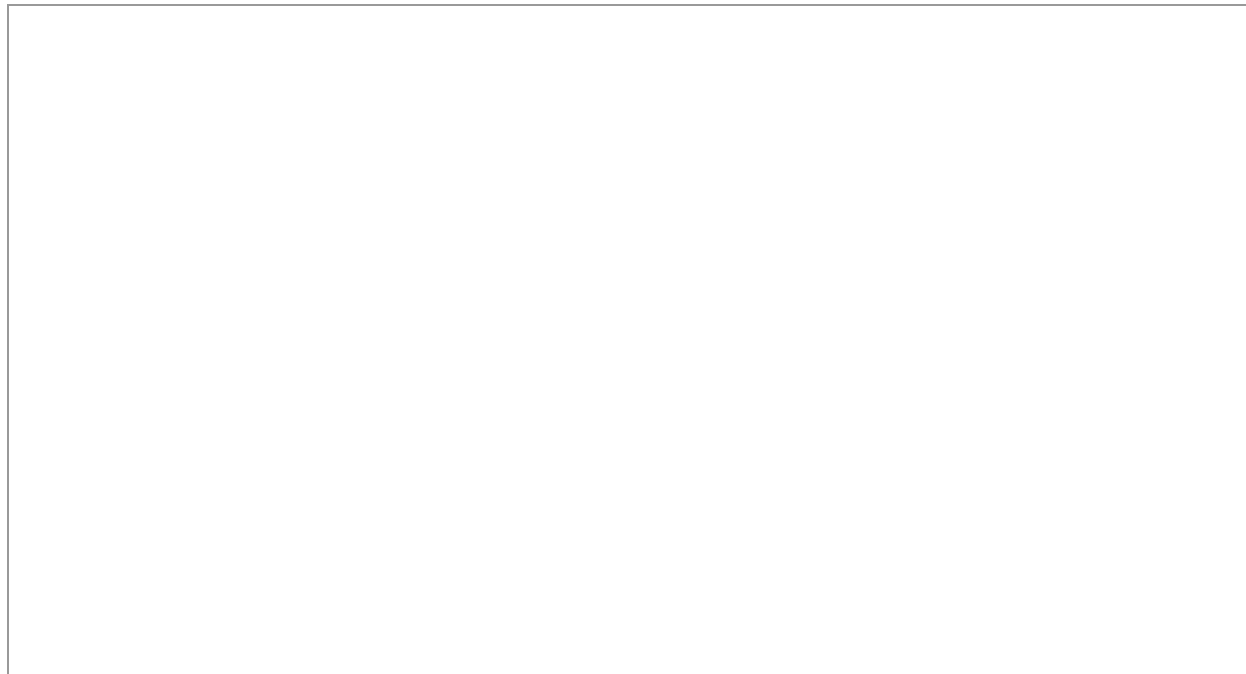
- No experience
- A little experience
- Some experience
- Significant experience

* 16. Diversity and Inclusion

- No experience
- A little experience
- Some experience
- Significant experience

* 17. Please state your skills or experience with diversity and inclusion. (answer limited to 2,000 characters)

* 18. Why are you interested in serving on the ClearWay Minnesota Board of Directors? (answer limited to 2,000 characters)

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STRATEGY

At the core of ClearWay Minnesota are four key strategies:

Policy: Support policies that reduce tobacco use and exposure to secondhand smoke.

Quitting: Support Minnesotans in quitting smoking.

Environment: Create an environment that supports a commercial tobacco-free future for Minnesotans.

Planning: Plan for ClearWay Minnesota's limited life.

* 19. Please indicate your interest or experience in any or all of these strategic areas: (answer limited to 2,000 characters)

* 20. ClearWay Minnesota embraces its status as a life-limited organization. Please describe your thoughts on how ClearWay Minnesota can maximize its impact in light of its life-limited status. (answer limited to 2,000 characters)

21. Is there any other information you would like us to know? (answer limited to 2,000 characters)

TOBACCO INDUSTRY AFFILIATION

Please tell us if you have had any affiliation with the tobacco industry.

* 22. The ClearWay Minnesota Articles of Incorporation prohibit individuals from being Board Members if they are or have been, within the last 10 years, paid by tobacco companies or trade associations for tobacco companies or businesses that sell tobacco products. Have you been compensated by a tobacco company or tobacco-related group during the last 10 years?

Yes

No

If yes, please explain (answer limited to 2,000 characters):

TOBACCO INDUSTRY AFFILIATION

* 23. In addition, no person may be a ClearWay Minnesota Board Member if he or she has received, within the last 2 years, a political contribution from a tobacco manufacturer or its lobbyist. Have you received a political contribution from a tobacco manufacturer or its lobbyist in the last 2 years?

Yes

No

If yes, please explain (answer limited to 2,000 characters):

CONFLICT OF INTEREST POLICY

ClearWay Minnesota's Conflict of Interest Policy prohibits contracts or grants to Board Members, their family members or any organizations with which Board Members are affiliated during their terms of service.

The Conflict of Interest Policy requires disclosure if a Board Member or Board candidate has been affiliated with any contracting organization or grantee during the year before becoming a ClearWay Minnesota Board Member. The Conflict of Interest Policy also requires disclosure if a family member of a Board Member or Board candidate is currently or has been affiliated with any contracting organization or grantee during the year before the Board Member joined the ClearWay Minnesota Board.

The Conflict of Interest Policy defines a family member as a spouse or domestic partner, parents, stepparents, siblings, children, stepchildren and spouses or domestic partners of the person's children and stepchildren. A Board Member is affiliated with an organization if he or she or a family member is an officer of, director of, employed by, an independent contractor for or receiving proceeds from a ClearWay Minnesota grant or contract or has a financial interest in the organization.

* 24. Please review [this list](#) of current ClearWay Minnesota vendors, grantees and contractors. Are you or a family member affiliated with any of the organizations that have grants or contracts with ClearWay Minnesota?

Yes

No

If yes, please explain (answer limited to 2,000 characters):

* 25. Do you or your family members have a grant or contract with ClearWay Minnesota?

Yes

No

* 26. Please provide the names and phone numbers for two people we can contact who are familiar with your professional or volunteer work.

Name:

Phone:

Name:

Phone:

ELECTRONIC SIGNATURE

Please provide us with your electronic signature to verify you have reviewed the criteria for membership on the ClearWay Minnesota Board of Directors and that to the best of your knowledge you do not have any conflicts of interest.

In order for your application to be complete, please email your resume and any additional application pages to Amy Henderson at ahenderson@clearwaymn.org.

* 27. I have reviewed the [Board Member Position Description](#) and am willing to make ClearWay Minnesota one of my primary volunteer commitments and understand the time and leadership responsibilities of my involvement.

Signature:

Date:

COMPLETE APPLICATION

Thank you for your application. To complete the application process, please send your resume and any additional pages of information to Amy Henderson (ahenderson@clearwaymn.org).