

Pacific Advisory Group NZNO (PAG) Interim

CRITERIA

To be eligible for nomination to the PAG, candidates must meet the following criteria:

Eligibility:

- Must be a current financial member of NZNO.
- Must identify as Indigenous Pacific Islander (Polynesian, Melanesian, or Micronesian).
- Must be nominated by their respective Pacific nursing association in Aotearoa New Zealand.
- Existing committee members of the Pacific Nurses Section NZNO, are eligible to be nominated.

Representation:

- Each Pacific nursing association may nominate one member.
- Three members may be nominated to represent “Other Pacific Islands” collectively.

Skills and experience:

- Demonstrated commitment to advancing Pacific health and nursing.
- Experience in leadership, advocacy, or governance roles is desirable.
- Understanding of Te Tiriti o Waitangi and its application in healthcare.

Responsibilities:

- Willingness to actively participate in at least four meetings per year.
- Ability to contribute to strategic planning, policy development, and cultural advocacy.
- Commitment to representing the interests of Pacific NZNO members.
- Commitment to attending other National group meetings on behalf of the PAG.

Nomination requirements:

- Completed nomination form endorsed by the relevant Pacific nursing association.
- Short biography and statement of interest (max 300 words).
- Confirmation of NZNO membership status.

NOMINATION FORM

SECTION A (to be completed by nominator)

I _____

On behalf of _____ (Name of Pacific Nursing Association in NZ)

wish to nominate _____

for a position on the Pacific Advisory Group NZNO.

Signed (by nominator) _____

Date: _____

SECTION B (to be completed by nominee)

I am a financial member of NZNO and willing to accept the position.

Full name: _____

Address: _____

Email: _____

Phone: _____

NZNO Membership number _____

Representing: _____

(Name of Pacific Nursing Association in NZ you are representing)

Work experience, include level of responsibility

Briefly explain what inspired you to submit an EOI. (if relevant, include previous experience).

Signature: _____ Date _____

Please attach a recent photograph of passport size or a close-up.

Please return the completed EOI Form to:

Sharyne Gordon

by email to: pacific@nzno.org.nz

by **Sunday 28 September at 5.00pm.**

To be valid, this form must be signed by the applicant who is a member of NZNO
and received by the closing date.