



**American Heart Association
2019-20 Associate Board of Chicago
Candidate Interest Form**

☐ Yes, I am interested in serving on the Associate Board. I understand that my term will begin July 1, 2019 and end June 30, 2021.

Name	
Affiliation	
Title	
Street Address (Work)	
City / State / Zip	
Work Phone	
Street Address (Home)	
Other Phone	
City / State / Zip	
Preferred Email	

Please check any of the following qualifications and experience that you will bring to the board:

- | | |
|---|--|
| <input type="checkbox"/> C-suite representation | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Grant writing | <input type="checkbox"/> Health equity |
| <input type="checkbox"/> Fundraising and special events | <input type="checkbox"/> Medical/research |
| <input type="checkbox"/> Public relations, communications | <input type="checkbox"/> Heart or stroke survivor |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Nonprofit experience |
| <input type="checkbox"/> Contact/networking | <input type="checkbox"/> Community representation |
| <input type="checkbox"/> Corporate wellness | <input type="checkbox"/> Healthcare representation |
| <input type="checkbox"/> Corporate representation | <input type="checkbox"/> Other _____ |

Please check any of the following which reflect your connection to heart disease and/or stroke:

- ☐ Parent of a child who has a heart condition
- ☐ Family member of a person who has heart disease, or suffered a heart attack or stroke
- ☐ Survivor of heart disease or stroke
- ☐ No connection
- ☐ Other (Please explain):

Please provide a statement explaining your interest in the American Heart Association's mission. (Attach additional sheets if necessary):

Please explain why you would like to serve on the Associate Board. (Attach additional sheets if necessary):

Signature block:

- ☐ I have read the attached Associate Board of Chicago Engagement Description and, if elected to serve, agree to uphold the responsibilities of Associate Board membership each year of my term
- ☐ I have completed the attached Associate Board Profile Builder
- ☐ I have attached my resume/CV

<hr/>	<hr/>
Signature	Date

Thank you for your interest in serving on the American Heart Association's Associate Board. Candidates will be selected and notified by August 2019.

Please complete and return pages 1-3 of this form no later than July 30, 2019, to:

American Heart Association, Attn: Kiara Landin, 300 S. Riverside Plaza, Suite 1200, Chicago, IL 60606
Email: Kiara.Landin@heart.org

Associate Board of Chicago Engagement Profile Builder

For (name) _____

Please complete and return this form to Kiara.Landin@heart.org . Thank you!



American
Heart
Association.

1. What's your passion? (check all that apply)

- ☐ Women ☐ Children ☐ Community Impact ☐ Patients ☐ Health ☐ Workplace Wellness ☐ Fundraising
☐ Health Equity ☐ CPR ☐ Systems of Care/QSI ☐ Research/Innovation ☐ Communications ☐ Other _____

2. What area(s) are you currently supporting? (meaning, you are an active volunteer, donate, promote, etc.)

- | | | |
|--|--|--|
| <input type="checkbox"/> Heart Walk | <input type="checkbox"/> Health Equity | <input type="checkbox"/> Youth Market |
| <input type="checkbox"/> Go Red for Women | <input type="checkbox"/> Patient Support Network | <input type="checkbox"/> Jump Rope for Heart |
| <input type="checkbox"/> Go Red Goes STEM | <input type="checkbox"/> American Heart Month | <input type="checkbox"/> Hoops for Heart |
| <input type="checkbox"/> Heart Ball/Crash the Ball | <input type="checkbox"/> American Stroke Month | <input type="checkbox"/> Red Outs |
| <input type="checkbox"/> Cycle Nation | <input type="checkbox"/> Workplace Wellness | <input type="checkbox"/> Quality Systems Improvement (QSI) |
| <input type="checkbox"/> Hard Hats with Heart | <input type="checkbox"/> National Walking Day | <input type="checkbox"/> AHA Research |
| <input type="checkbox"/> CPR & Emergency Cardiovascular Care (ECC) | <input type="checkbox"/> National Eating Healthy Day | <input type="checkbox"/> Media Spokesperson |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Community Impact | <input type="checkbox"/> Little Hats, Big Hearts™ |
| <input type="checkbox"/> You're the Cure | <input type="checkbox"/> EmPowered to Serve | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Lobby Day | | |

3. What area(s) would you like to support or learn more about?

- | | | |
|--|--|--|
| <input type="checkbox"/> Heart Walk | <input type="checkbox"/> Patient Support Network | <input type="checkbox"/> Youth Market |
| <input type="checkbox"/> Go Red for Women | <input type="checkbox"/> American Heart Month | <input type="checkbox"/> Jump Rope for Heart |
| <input type="checkbox"/> Go Red Goes STEM | <input type="checkbox"/> American Stroke Month | <input type="checkbox"/> Hoops for Heart |
| <input type="checkbox"/> Heart Ball | <input type="checkbox"/> Workplace Wellness | <input type="checkbox"/> Red Outs |
| <input type="checkbox"/> Cycle Nation | <input type="checkbox"/> National Walking Day | <input type="checkbox"/> Quality Systems Improvement (QSI) |
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| <input type="checkbox"/> CPR & Emergency Cardiovascular Care (ECC) | <input type="checkbox"/> Community Impact | <input type="checkbox"/> Media Spokesperson |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> EmPowered to Serve | <input type="checkbox"/> Little Hats, Big Hearts™ |
| <input type="checkbox"/> You're the Cure | | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Lobby Day | | |
| <input type="checkbox"/> Health Equity | | |

4. Are you interested in additional leadership opportunities within the American Heart Association?

- ☐ I am interested in a leadership role on the Associate Board of Chicago (officer, committee chair, etc.)
- ☐ I am interested in chairing an event campaign and/or participating on an Executive Leadership Team.
- Check event(s) of interest: Hard Hats with Heart ____ Heart Ball ____
Heart Walk ____ Go Red for Women ____ Cycle Nation ____
Community Impact Leadership ____ Worksite Wellness Committee ____
- ☐ My organization uses AHA's Workplace Health Solutions. ☐ Yes ☐ No ☐ Unsure
- ☐ I can assist with recruitment of future chairs of fundraising events. ☐ Yes ☐ No ☐ Not at this time
- ☐ Interested in becoming a member of AHA's Metro Board of Directors.

5. What is one skill or resource you'd like to contribute as an associate board member?



Associate Board Member of Chicago

Position Title:	Associate Board Member of Chicago
Staff Partner(s):	Kiara Landin kiara.landin@heart.org
Term:	Two-year term, renewable twice (maximum 6 years)
Time Commitment:	Quarterly board meetings, periodic committee meetings, donor cultivation and stewardship meetings.

American Heart Association Associate Board members bring a combination of skills, experience, passion and influence to accomplish the revenue and health goals of an AHA division. Associate Board members apply their time, talent and resources toward building resource capacity and improving the cardiovascular health of the community. Major responsibilities include:

Leadership:

Serves as a community ambassador and advocate for the AHA publicly and within their spheres of influence.

- Attends and actively participates in scheduled associate board and committee meetings.
- Actively participates in at least one revenue-related event and one health-related activity.
- Fully supports the recruitment and development of an associate board that is representative of the community demographics.
- Accessible to AHA staff and other members of the associate board as needed.
- Scrupulously abides by the Conflict of Interest policy.
- Actively participates as a member of the You're the Cure Network.
- Supports the AHA's mission with annual membership dues of \$75.00.

Motivation:

- Is fully engaged in the goals and work of the AHA.
- Is a visible associate board member and understands the role that associate board members play (as a group and individually) in the success of the division.

Achievement:

- Provides access to a network of community and corporate leaders who can facilitate the AHA's ability to achieve the health and revenue goals of the division.
- Actively support in the activities of AHA's community health improvement efforts.
- Understands and fully supports the mission and policies of the AHA.
- Commits to an overall minimum fundraising goal of \$425 during the fiscal year (July 1-June 30).

Qualifications:

- Demonstrated leadership or equivalent in business, organization or industry.
- Decision making ability and authority to engage businesses, organizations or centers of influence on behalf of the AHA.
- Ability and willingness to act in support of, and engage others in, the AHA mission.
- Commits to attending 3 out of 4 meetings per year.

Fundraising Incentives:

- \$2,500 = 2 tickets to Crash the Ball
- \$5,000 = 2 tickets to either the Go Red Luncheon or Heart Innovation Forum
- \$10,000 = 2 tickets to Heart Ball
 - Dollars can be brought in via individual donations and/or sponsorships secured.