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Form 3C

**CONFIRMATION OF EMPLOYER SUPPORT  
OF AN IPAC CANADA BOARD MEMBER**

(to be completed by employer of nominee for Board of Directors)

This is to confirm that \_\_\_\_\_ agrees to support our  
(Employer/Facility)  
employee, \_\_\_\_\_, who has been nominated to the  
(Name of Nominee)  
position of \_\_\_\_\_ on the Board of Directors of  
(Position)

Infection Prevention and Control Canada/Prévention et contrôle des infections Canada (IPAC Canada/PCI Canada)

for a term \_\_\_\_\_  
(Date of commencement and expiry of term)

We understand that the duties of this position are extremely important to guiding the practice of Infection Prevention and Control in Canada and that significant professional time may be required to fulfill this role. We are also aware that this is a voluntary position and there is no remuneration or honorarium.

It is anticipated that 2-8 work hours per week may be required. We also recognize that a significant number of personal hours will likely be spent during the fulfillment of this position's duties. We also understand that periodic time away from the institution may be required for committee meetings, Board meetings, and the annual IPAC Canada conference and Annual General Meeting. It is anticipated that the schedule of these meetings will be provided to the employee on election to the position. We also understand that non-scheduled meetings may occur. These will be discussed by the employee, employer, and IPAC Canada to determine if the employee will be available to attend.

Elections will be held on Wednesday, May 18, 2016 at the 2016 Annual General Meeting. An orientation for new and returning Board members will be held in the afternoon following elections. IPAC Canada does not provide travel or accommodation for nominees who are not already on the Board.

We congratulate IPAC Canada on the nomination of our employee to serve the profession as a member of the Board of Directors. We trust that both the association and the profession will be well served by this choice.

\_\_\_\_\_  
Employer/Facility

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Return completed form to:  
Marilyn Weinmaster, Chair, Nominations Committee  
Infection Prevention and Control Canada/Prévention et contrôle des infections Canada  
PO Box 46125 RPO Westdale  
Winnipeg MB R3R 3S3

[executivedirector@ipac-canada.org](mailto:executivedirector@ipac-canada.org)

June 14, 2014  
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