

APPLICATION INFORMATION

OFFICE OF THE SENIORS ADVOCATE
COUNCIL OF ADVISORS



OFFICE OF THE
SENIORS ADVOCATE

Application Timeline

- **Applications Open:** March 8, 2023
- **Applications Close:** April 15, 2023
- **All applicants will be notified:** End of May 2023

Key Criteria

To be considered, all applicants must:

- Be 55 years of age or older.
- Have regular access to a computer and be able to use email and internet applications, MS Office programs and Zoom or other virtual meeting applications.
- Be able to travel to three meetings per year in the Lower Mainland and/or Victoria and participate in virtual meetings when necessary. * *Travel expenses paid*
- **Not be** an employee of the B.C. government, or have a financial interest in any seniors' service provider (This information may indicate a potential conflict of interest.)
- Have a background, interest and community involvement in seniors' issues and services in B.C.

Please note:

- This is a voluntary position. Members of the Council of Advisors are not remunerated.
- Upcoming meetings will be held on September 24-25, 2023, and in January and May of 2024 (dates TBC). All members of the council are expected to attend in person.

Application Instructions

1. **Application Form:** Please fill out the application form, save, and attach to an email.
2. **Resume:** Include professional and volunteer experience.
3. **Letter of Reference:** Include the contact information of the reference.
4. **Submission:** Attach completed application documents to an email and send them to osa.comms@gov.bc.ca with the subject line "Application to Council of Advisors", or mail to address below. You will receive a confirmation email upon receipt of your application.
Office of the Seniors Advocate, 1405 Douglas St.
PO Box 9651 STN PROV GOVT
Victoria, BC V8W 9P4
5. **Interview:** Applicants may be contacted by a staff member for a brief interview to go over application materials.

Please read instructions and the accompanying materials carefully. Only complete application packages will be considered for review by our office. For questions or difficulties with the application, please email osa.comms@gov.bc.ca or call 250-213-2024.

APPLICATION FORM

— OFFICE OF THE SENIORS ADVOCATE -
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OFFICE OF THE
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APPLICANT INFORMATION

Full Name :

Home Address :

Email : Phone Number:

ESSENTIAL CRITERIA

1. Are you 55 years of age or older? Yes No

Please identify your age group:

2. Are you a resident of British Columbia? Yes No

In which provincial health authority region do you reside?

3. Are you able to travel to the Lower Mainland and/or Victoria for three, two-day meetings per year (expenses paid)? Yes No

4. Do you have regular access to a computer, and can you use the Internet, email, MS Office, Zoom and other virtual meeting programs? Yes No

5. Are you currently an employee of the B.C. government, or have a financial interest in any seniors' service provider? Yes No

If yes, please provide more detail. This information may indicate a potential conflict of interest:

SEEKING DIVERSITY

The Office of the Seniors Advocate seeks a cross-section of views and perspectives on seniors' issues in B.C. We strive to include diversity, equity and inclusion practices. Please assist us by answering the following questions if you are comfortable doing so.

6. Do you wish to self-identify as any of the following? Please check any that apply.

- Visible minority
- Person with a disability
- First Nations, Metis and/or Inuk
- LGBTQS+

Yes No

7. Do you speak any languages other than English?

TELL US ABOUT YOURSELF

**7. Why would you like to become a member of the OSA Council of Advisors?
(1,500 characters max.)**

8. What relevant skills and experience would you bring to the Council of Advisors? Please include specific knowledge and understanding of seniors' issues. (1,500 characters max.)

9. Save this form, attach it an email and send to osa.comms@gov.bc.ca. Please also attach a resume and letter of reference. These should include relevant examples of your skills, community connections, as well as any projects you have been involved in.

Date

Applicant Signature
and/or Full Name

THANK YOU FOR YOUR APPLICATION



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