

## 2026 Regulatory Committee Expression of Interest

Before you begin, it is recommended that you **set aside 45 minutes** to complete this form.

To get a sense of what this form will ask of you, click [HERE](#) to see a preview of the full form that you will be completing. You will be asked to **upload a current resume in PDF format**.

You must complete the form in one sitting. **This form does not support saving and coming back later.** Make sure you have all of your information ready before you begin. After you submit the form, you will not be allowed to return to the form at a later date.

Move through the questions in the form by clicking "Next". If at any point you would like to revisit your entries, you can click "Previous" to take you to previous pages.

**This form must be fully completed and submitted by 11:59 P.M. MT on Sunday, February 22, 2026.**

If you have any problems with the functionality of this form, please reach out to [expressionofinterest@nurses.ab.ca](mailto:expressionofinterest@nurses.ab.ca).

### Eligibility Criteria

You can view the list of eligibility criteria on our website under [Bylaw 2: Governance](#).

Please confirm you meet the following eligibility criteria:	
<input type="checkbox"/>	I am a resident of Alberta.
<input type="checkbox"/>	I am at least 18 years old.
<input type="checkbox"/>	I am not a spouse, partner, child, or parent of a current member of CRNA Council.
<input type="checkbox"/>	I am not currently employed by the CRNA or another nurse regulator in Alberta or Canada.
<input type="checkbox"/>	I meet all eligibility requirements as outlined in Bylaw 2.6.

### Personal Information

First Name

  

Last Name

**Preferred Pronouns (voluntary)**

- She/Her
- He/Him
- They/Them
- Other (please specify):
- Prefer not to answer

**Phone Number****Email Address****City of Residence****Practice Information****CRNA Registration Number (if applicable)****Registration Category**

- RN
- NP
- Other (please specify):
- Not Applicable

**Registrant Practice Sector: In what areas do you have significant experience? (select all that apply)**

- Critical Care
- Emergency Care
- Long-term Care
- Mental Health Care
- Pediatric Care
- Primary Care
- Public Health
- Rural Health Care

<input type="checkbox"/> Women's Health Care
<input type="checkbox"/> Education
<input type="checkbox"/> Other (please specify):
<input type="checkbox"/> Not Applicable

<b>Primary Practice Region (select all that apply)</b>	
<input type="checkbox"/> Calgary	
<input type="checkbox"/> Edmonton	
<input type="checkbox"/> Rural	
<input type="checkbox"/> Town	
<input type="checkbox"/> Urban	
<input type="checkbox"/> Central Alberta	
<input type="checkbox"/> Northern Alberta	
<input type="checkbox"/> Southern Alberta	
<input type="checkbox"/> Not Applicable	

## Regulatory Committees

<b>1.</b>	<b>Please identify the CRNA regulatory committee(s) for which you are volunteering: (Select all that apply)</b>
<input type="checkbox"/> Competence Committee <input type="checkbox"/> Complaint Review Committee & Hearing Tribunal Membership List <input type="checkbox"/> Registration Committee	

<b>2.</b>	<b>Are you currently serving or have you ever served on the CRNA Council or a CRNA regulatory committee?</b>
<input type="checkbox"/> Yes Please specify: <input type="checkbox"/> Current <input type="checkbox"/> At least one year has passed since last serving <input type="checkbox"/> No	

<b>3.</b>	<b>Why are you interested in serving on a CRNA regulatory committee?</b>
<input type="text"/>	

4.	<b>Tell us about any unique experience or skills you have that will enhance the governance, oversight, and public protection responsibility of the CRNA and its Regulatory Committees.</b>

5.	<b>Tell us how your education, experience and career goals will contribute to the effectiveness of the CRNA Regulatory Committees.</b>

## Competencies Self-Assessment

For the following questions, please use the following 5-point scale to self-assess your competencies and experience, and provide details to support your rating.

*Please note: The desired competencies and attributes are what the Regulatory Committees should possess as a group. Do not be discouraged from applying just because you only have a couple of these competencies and attributes as they may be exactly what is being sought. Everyone will possess a small number of them and, in their own way, contribute to the collective body.*

Ranking	Description
1: None	No formal education, experience or particular competency in the area.
2: Basic	Basic understanding of the area. <b>You know about it.</b> For example, you: <ul style="list-style-type: none"> <li>• Have an educational background that allows for a basic understanding of the area</li> <li>• Have some experience related to the area</li> <li>• Have a basic understanding of the principles of the area</li> <li>• Can follow the Committee's discussion of the area</li> </ul>
3: Competent	Competent understanding of the area. <b>You can explain it.</b> For example, you: <ul style="list-style-type: none"> <li>• Have extensive management experience in this field or you have good skills in this area, you may have a degree, diploma, or designation, or at least a strong understanding of this area from a management perspective</li> <li>• Have successfully completed education relevant to the area</li> <li>• Have demonstrated experience in a field related to the area</li> <li>• Have a competent grasp of principles of the area</li> <li>• Can contribute to the Committee's discussion of the area</li> </ul>
4: Advanced	Advanced understanding of the area. <b>You can do it.</b> For example, you: <ul style="list-style-type: none"> <li>• Have extensive senior management experience in this field or enough skill in this area to be paid for your work at an executive management level in this area, either through employment or as a consultant or teacher, you have mastered this skill</li> <li>• Have post-secondary education specifically relevant to the area</li> </ul>

	<ul style="list-style-type: none"> <li>• Have significant experience as a practitioner in the area</li> <li>• Possess practical knowledge specific to the area and can meaningfully engage with practical questions</li> <li>• Can analyze and explain relevant data and contribute significantly to the Committee's discussion of the area</li> </ul>
<b>5: Expert</b>	<p>Expert-level understanding of the area. <b>You can teach it.</b> For example, you:</p> <ul style="list-style-type: none"> <li>• Have over 10 years of full-time executive management experience in this field or you would be considered an “expert” or “specialist” in this area by your peers and others who specialize in this skill</li> <li>• If available, have a professional designation or postgraduate degree specifically relevant to the area</li> <li>• Have extensive experience as an expert practitioner in the specific area in question</li> <li>• Have extensive and up-to-date knowledge of trends and best practices in this area, and could function or are functioning as a high-level practitioner in the area</li> <li>• Can analyze and explain relevant data, lead Committee discussion, develop long-term strategy and challenge experts in the area</li> </ul>

## Professional Experience

<b>6.</b>	<b>Health Care Terminology:</b> Rate your knowledge and understanding of the common terminology, acronyms and phrases used in health care.
1: None 2: Basic 3: Competent 4: Advanced 5: Expert	If you have selected advanced or expert, please provide evidence that supports your level of expertise.

<b>7.</b>	<b>Health Professions Regulation:</b> Rate your experience and understanding of the role and philosophy of health professions regulators, including their public protection mandate, relevant legislation, regulations, bylaws and policies.
1: None 2: Basic 3: Competent 4: Advanced 5: Expert	If you have selected advanced or expert, please provide evidence that supports your level of expertise.

--

<b>8.</b>	<b>Information Analysis and Judgement:</b> Rate your experience with and ability to carefully review a large volume of material within set timelines.
1: None 2: Basic 3: Competent 4: Advanced 5: Expert	
If you have selected advanced or expert, please provide evidence that supports your level of expertise.	

<b>9.</b>	<b>Professional Standards and Professional Ethics:</b> Rate your knowledge and experience of the standards of practice and code of ethics.
1: None 2: Basic 3: Competent 4: Advanced 5: Expert	
If you have selected advanced or expert, please provide evidence that supports your level of expertise.	

<b>Leadership</b>	
<b>10.</b>	<b>Committee/Panel Leadership:</b> Please rate your experience in facilitating committee or panel meetings, particularly at a governance level. (E.g., serving as a chair or co-chair of a committee, leading discussions, etc.)
1: None 2: Basic 3: Competent 4: Advanced 5: Expert	
If you have selected advanced or expert, please provide evidence that supports your level of expertise.	

--

11.	<p><b>Principles:</b> Please rate your knowledge and understanding of the basic principles of administrative law, restorative justice, and quasi-judicial processes within the college's mandate and power.</p> <p>1: None 2: Basic 3: Competent 4: Advanced 5: Expert</p> <p>If you have selected advanced or expert, please provide evidence that supports your level of expertise.</p>
-----	---

12.	<p><b>Leadership:</b> Rate your knowledge and understanding of senior leadership responsibilities based on your professional experience.</p> <p>1: None 2: Basic 3: Competent 4: Advanced 5: Expert</p> <p>If you have selected advanced or expert, please provide evidence that supports your level of expertise.</p>
-----	--

## Public Trust Experiences, Backgrounds and Perspectives

13.	<p><b>Dignity and Trust:</b> A variety of backgrounds and experiences that reflect the community the College serves and the various contexts within health care. Demonstrated ability to welcome, understand and work effectively with those who are diverse in their thoughts, values and backgrounds. Demonstrated ability to support ethical conduct and competence recognizing the role the College plays in fostering dignity and public trust within the health system.</p> <p>If you choose, please give a brief description of how you and your unique skills and experiences would contribute to the CRNA's Regulatory Committees.</p>
-----	---

--

14.	<p><b>Cultural Safety and Humility:</b> Have an ongoing learning, appreciation and respect for unique perspectives, cultural contexts, power imbalances and biases in deliberation and decision-making, and recognition of the role the College plays in fostering cultural safety within the health system.</p> <p>Please give a brief description of how you would contribute to and protect the cultural safety and humility of the CRNA Council.</p>
-----	--

## Education and Experience

<b>Post-Secondary Education</b> (please select all that apply)	
<input type="checkbox"/> BN	
<input type="checkbox"/> BScN	
<input type="checkbox"/> MN	
<input type="checkbox"/> MScN	
<input type="checkbox"/> PhD	
<input type="checkbox"/> MBA	
<input type="checkbox"/> BA	
<input type="checkbox"/> Other (please specify)	

<b>Other Relevant Education, Designations or Professional Development</b> (Please specify)	

<b>Relevant Board, Committee or Volunteer Experience</b> (Please specify)	

<b>Resume:</b> Please upload a current resume in PDF format.	

## Consent and Understanding

If you have any questions or concerns, please email us at [expressionofinterest@nurses.ab.ca](mailto:expressionofinterest@nurses.ab.ca).

**Checking these boxes will act as your confirmation and consent.**

<input type="checkbox"/>	I confirm the above information is true and accurate.
<input type="checkbox"/>	I authorize CRNA or its agent to conduct reference checks in the event I am shortlisted for recommendation for appointment.

**Data Consent**

<input type="checkbox"/>	Yes, I give permission for the College of Registered Nurses of Alberta to store and process my data.
--------------------------	--

By clicking "Submit" below, you will complete and submit this form.

If you are not ready to submit your form and would like to review your submission before completion, click the "Previous" button to review prior pages. **This form does not support saving and coming back later.**