

2026 Council Expression of Interest

Before you begin, it is recommended that you **set aside 60 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.

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 <i>(voluntary)</i>
<input type="checkbox"/> She/Her
<input type="checkbox"/> He/Him
<input type="checkbox"/> They/Them
<input type="checkbox"/> Prefer not to answer
<input type="checkbox"/> Other (please specify):

Phone Number

Email Address

City of Residence

Practice Information

CRNA Registration Number (if applicable)

Registration Category
<input type="checkbox"/> RN
<input type="checkbox"/> NP
<input type="checkbox"/> Other (please specify):

Registrant Practice Sector: In what areas do you have significant experience? (select all that apply)
<input type="checkbox"/> Critical Care
<input type="checkbox"/> Emergency Care
<input type="checkbox"/> Long-term Care
<input type="checkbox"/> Mental Health Care
<input type="checkbox"/> Pediatric Care
<input type="checkbox"/> Primary Care
<input type="checkbox"/> Public Health
<input type="checkbox"/> Rural Health Care
<input type="checkbox"/> Women's Health Care

<input type="checkbox"/> Education
<input type="checkbox"/> Other (please specify):

Primary Practice Region <i>(select all that apply)</i>
<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

Council

1.	Why are you interested in serving on the CRNA Council?

2.	Are you currently serving or have you ever served on the CRNA Council?
<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	

3.	Are you currently serving or have you ever served on a CRNA Regulatory Committee? <i>(Select all that apply)</i>
<input type="checkbox"/> Competence Committee	
<input type="checkbox"/> Complaint Review Committee	
<input type="checkbox"/> Hearing Tribunal	
<input type="checkbox"/> Nursing Education Program Approval Committee	
<input type="checkbox"/> Registration Committee	
<input type="checkbox"/> Registration Review Committee	
<input type="checkbox"/> I have not served on a CRNA regulatory committee	

4.	Tell us about any unique experience or skills you have that will enhance the governance, oversight and public protection responsibility of the CRNA Council.

5.	Tell us how your education, experience and career goals will contribute to the effectiveness of the CRNA Council.

Competencies Self-Assessment

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

Please note: The desired competencies and attributes are what the Council 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. You know about it. For example, you: <ul style="list-style-type: none"> • Have an educational background that allows for a basic understanding of the area • Have some experience related to the area • Have a basic understanding of the principles of the area • Can follow the Council's discussion of the area
3: Competent	Competent understanding of the area. You can explain it. For example, you: <ul style="list-style-type: none"> • 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 • Have successfully completed education relevant to the area • Have demonstrated experience in a field related to the area • Have a competent grasp of principles of the area • Can contribute to the Council's discussion of the area
4: Advanced	Advanced understanding of the area. You can do it. For example, you: <ul style="list-style-type: none"> • 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 • Have post-secondary education specifically relevant to the area • Have significant experience as a practitioner in the area

	<ul style="list-style-type: none"> • Possess practical knowledge specific to the area and can meaningfully engage with practical questions • Can analyze and explain relevant data and contribute significantly to the Council's discussion of the area
5: Expert	<p>Expert-level understanding of the area. You can teach it. For example, you:</p> <ul style="list-style-type: none"> • 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 • If available, have a professional designation or postgraduate degree specifically relevant to the area • Have extensive experience as an expert practitioner in the specific area in question • 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 • Can analyze and explain relevant data, lead Council discussion, develop long-term strategy and challenge experts in the area

Regulatory Oversight

The College register contains registrants who provide safe, competent and ethical care.

6.	Health Professions Regulation: Rate your understanding of and experience with health professions regulations.
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.	

7.	Health System: Rate your knowledge, experience or understanding of Alberta's health system and regulatory issues.
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.	

8.	Regulatory System: Rate your knowledge of and experience in professional regulation.
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.	

Strategic Oversight

The College achieves its strategic direction within its regulatory mandate.

9.	Strategic Direction: Rate your ability to provide strategic direction, and experience participating in, or leading, an organization in planning for its future.
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.	

10.	Quality Improvement: Rate your experience and understanding of quality assurance and quality improvement.
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.	

Risk Oversight

The College has a culture of proactive and deliberate risk management.

11.	Risk Oversight: Rate your experience with overseeing risks and setting direction (proportional to the risk of harm to the public and to the CRNA).
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.	

Financial Oversight

The College maintains its financial viability through strategic resource allocation. The College is committed to pension viability and compliance with pension legislation.

12.	Financial Understanding and Oversight: Please rate your experience with financial oversight. (Reading and interpreting financial statements, overseeing budgeting and financial planning, ensuring compliance and internal controls, and ability to understand and communicate financial information effectively).
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.	

Governance/Operational Oversight

The Council governs the College activities within public interest and within applicable legislation

13.	Governance Experience: Rate your understanding and experience with governance roles and responsibilities, issues and trends. (Through prior board experience, and/or governance education.)
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.	

14.	Council/Committee Leadership: Rate your experience in facilitating Council, board and/or committee meetings. (Which may include chairing.)
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.	

15.	Public Interest and Service: Please describe your understanding of the CRNA's public protection mandate and how you would prioritize the public interest over personal or professional interests.
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.	

16.	Human Resources Experience: Rate your experience with human resources management. (Performance management, talent management, succession planning, professional development, compensation, evaluation, leadership selection, and education.)
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.	

Culture Oversight

The College maintains responsible and healthy relationships externally and internally.

17.	Dignity, Trust and Ethical Leadership: Rate your experience implementing, supporting, or leading initiatives that promote public trust, ethical conduct and dignity in your work or organizational context. This may include areas such as policy development, ethical training, recruitment strategies, or community engagement.
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.	

18.	Dignity and Trust: 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. Please give a brief description of how you and your unique skills and experiences would contribute to the CRNA Council.
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Education and Experience

Post-Secondary Education *(please select all that apply)*

☐ BN

☐ BScN

☐ MN

☐ MScN

☐ PhD

☐ MBA

☐ BA

☐ Other (please specify)

Other Relevant Education, Designations or Professional Development *(Please specify)*

Relevant Board, Committee or Volunteer Experience *(Please specify)*

Resume: 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.

Checking these boxes will act as your confirmation and consent.

☐

I confirm the above information is true and accurate.

<input type="checkbox"/>	I authorize the CRNA or its agent to conduct reference checks in the event I am shortlisted for consideration for recommendation for appointment.
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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.**

PREVIEW ONLY