



*Proudly serving individuals with disabilities in the Valdez & Copper River Basin areas since 1994*

# Application for Board of Directors Connecting Ties, Inc.

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_
3. Phone #: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_
4. Occupation: \_\_\_\_\_  
Title: \_\_\_\_\_

**Please provide a brief biography:**

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**5. Please provide a brief work history:**

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**6. What strengths do you feel you would bring to the board?**

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**7. What direction do you feel CTI should be heading towards in the future?**

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**8. What days and times of the month are typically best for you to meet on?**

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# Confidentiality Agreement

It is the policy of Connecting Ties, Inc. (CTI) that its internal business affairs and other confidential information represents CTI's proprietary information that each employee has a continuing obligation to protect. In exchange for continued employment with CTI, employee agrees to protect CTI's confidential and proprietary information as set forth below:

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Employee/Board member/Volunteer understands that in the course of his or her employment with CTI, Employee/ Board member/Volunteer may come into possession, or have access to CTI's "confidential information". As used in this Confidentiality Agreement, "confidential information" includes, but is not limited to any information that would constitute a trade secret under applicable law; as well as all medical and personal information concerning CTI's clients and/or employees; information regarding the provision of services or submission of claims; information regarding internal and external staff providers and their credentials or credentialing status; provider allowances; and CTI's business plans and/or strategies.

Accordingly, as a condition of employment and in consideration of Employee's/Board member's/Volunteer's access to CTI's confidential information, Employee/Board member/Volunteer agrees as follows:

- Employee/Board member/Volunteer agrees to hold CTI's confidential information in the strictest confidence and not to disclose or otherwise utilize CTI's confidential information except as necessary for Employee to perform his or her customary and regular job duties. This means, among other things that:
  - Employee/Board member/Volunteer will only access confidential information for which Employee/Board member/Volunteer has a legitimate business and/or clinical need to know.
  - Employee/Board member/Volunteer will not in any way disclose, divulge, copy, release, sell, loan, review, alter or destroy any of CTI's confidential information except as properly authorized within the scope of Employee's/Board member's/Volunteer's employment with CTI.
  - Employee/Board member/Volunteer will not otherwise misuse or misappropriate CTI's confidential information.

- Employee/Board member/Volunteer further agrees to prevent unauthorized use of confidential information and agrees to report any unauthorized use of confidential information to CTI's Compliance Officer and/or Chief Privacy Officer.
- Employee/Board member/Volunteer agrees not to remove any record (including copies), or any other type of confidential information from the office where it is kept, except in the performance of Employee's/Board member's/Volunteer's regular and customary job duties.
- Employee/Board member/Volunteer agrees not to remove any copies of records from CTI's property at any time without prior consent of Employee's/Board member's/Volunteer's immediate supervisor.
- Employee/Board member/Volunteer agrees not to divulge his or her network password to anyone else, or allow anyone else to access or alter information under Employee's/Board member's/Volunteer's identity.

Employee/Board member/Volunteer acknowledges that failure to comply with the obligations contained in the Confidentiality Agreement will result in disciplinary action, up to and including termination of employment. Employee/Board member/Volunteer agrees that the obligations contained in this Confidentiality Agreement will continue after termination of employment, whether Employee's/Board member's/Volunteer's employment is terminated voluntarily or involuntarily.

I have read and understand the above information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

# Board Member Code of Ethics

## As a member of this board, I will:

- Represent the interest of all people served by this organization.
- Not use the organization or my service on this board for my own personal advantage or for the individual advantage or my friends or supporters.
- Keep confidential information confidential.
- Approach all board issues with an open mind, prepared to make the best decision for the whole organization.
- Do nothing to violate the trust of those who elected me to the board or of those we serve.
- Focus my efforts on the mission of the organization and not on my personal goals.
- Never exercise authority as a board member except when acting in a meeting with the full board or as I am delegated by the board.

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Your Signature

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Date

### **Mission Statement:**

**Connecting Ties, Inc. is a non-profit corporation dedicated to ensuring that individuals with disabilities and their families have equal opportunity to be fully included in the community of their choice, where education, employment, housing, recreation, and family support services are available, and to be treated with the same respect and dignity afforded any member of the community.**

# Board Member Job Description

## Expected meeting attendance:

- Regularly attend meeting as scheduled (about 12 per year)
- Attend standing committee meetings if a member (about 6 per year)
- Participate as an ad hoc committee member if appointed
- Attend board retreats, in-service workshops and other board development activities
- Attend and participate in special events as needed.

## Obligations of the board:

- Establish policy
- Hire, supervise and evaluate the executive director
- Monitor finances
- Maintain and update long-range plans

## Specific duties:

- Attend meetings and show commitment to board activities
- Be well-informed on issues and agenda items in advance of meetings
- Contribute skills, knowledge and experience when appropriate
- Listen respectfully to other points of view
- Participate in organizational decision-making
- Assume leadership roles in all board activities, including fundraising
- Represent the organization to the public and to private industry
- Educate yourself about the needs of the people served

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Board member signature

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Date

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Executive Director's Signature

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Date

# Policy and Procedure Manual

Connecting Ties, Inc.  
P.O. Box 2017  
Valdez, AK. 99686

Date: 6/1/98

Effective Date: 6/2/98

Subject: **CONFLICT OF INTEREST**      Approved by: P&P Committee

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## **PURPOSE:**

The purpose of this policy is to emphasize the importance of declaring potential conflicts of interest and to assist the Director, officers, and employees of CTI in disclosing such potential conflicts.

## **APPLIES TO:**

This policy applies to any situation that may present a conflict of interest between a board member's or employee's personal or professional interests and his/her responsibilities to CTI.

## **POLICY:**

It is the policy of CTI that each board member and each employee will disclose any issue which represents an actual or potential conflict of interest between his/her personal or professional interests and his/her responsibilities to CTI.

## **RESPONSIBILITY:**

The parties responsible for compliance with this policy are the board members and the employees of CTI.

## **PROCEDURE:**

1. Upon election or appointment to the CTI board or upon hire as a CTI employee, each individual will be asked to complete the Conflict of Interest Disclosure Statement (attached).

# Connecting Ties, Inc.

## Conflict of Interest Disclosure Statement

I acknowledge that I have received a copy of the Connecting Ties, Inc. Conflict of interest policy. I am not involved in any situation which could be construed as placing me in the position of having a potential conflict of interest with CTI except possibly the following:

**Note:** If you answer "yes" to any questions, please describe the relationship in detail in #4. If a member of your family is involved in a situation which would require a "yes" please describe that relationship in #4 also.

1. Are you involved with any organization which does business with CTI?

Supplier of goods	Yes_____	No_____
Supplier of services	Yes_____	No_____
Advisor/Consultant	Yes_____	No_____
Other_____	Yes_____	No_____

2. If you have any "yes" answers to question 1, what is the level of your involvement?

\_\_\_\_\_ Investor  
\_\_\_\_\_ Employee  
\_\_\_\_\_ Director/Board member  
\_\_\_\_\_ Advisor/Consultant  
\_\_\_\_\_ Other

3. During the past year did you receive any gift, payment or entertainment (other than common business courtesies which are reasonable in nature and cost) from people who do business with CTI?      Yes\_\_\_\_\_      No\_\_\_\_\_

4. Comments:

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If a possible conflict of interest should arise in the future, I will report it promptly to the Chair of the Board or Executive Director.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_