



## Application Form

### Healthy Alaskans Advisory Team and Healthy & Equitable Communities Committee

Healthy Alaskans 2030 is the state health improvement plan and initiative that seeks to address the most significant health concerns that face Alaskans. The purpose of the Healthy Alaskans Advisory Team is to provide guidance and recommendations for the implementation of Healthy Alaskans 2030 Strategic Plan. The Healthy and Equitable Communities Advisory Committee seeks to address health issues impacting high-risk and underserved Alaskans, as well as the implementation of the Healthy and Equitable Communities Strategic Plan. Both plans are designed to support equitable access to opportunities for all Alaskans to lead healthy lives. The State of Alaska Department of Health and the Alaska Native Tribal Health Consortium are seeking advisory members who represent the diverse organizations, communities, and voices throughout Alaska's health system, and bring a broad set of expertise and input to these efforts. Members can choose to serve on one team or both.

Roles of the Advisory Team and Healthy & Equitable Communities Committee include:

1. Raising awareness about the improvement plan of both entities.
2. Promoting or directly engagement in implementation of plan strategies and actions.
3. Guiding the development of materials, structures and processes to improve the plans implementation efforts.
4. Monitoring progress of plan targets, strategies, and actions.

Name:

Phone:

Email:

Organization (Select all that apply):  Tribal Health Organization;  DOH;  Hospital;  Clinic;  Local Health Dept.;  Community Member;  Professional Organization;  Foundation  Social Service Agency;  Business/Community Partner;  Healthcare Professional;  Local Government;  Education;  Nonprofit;  Faith Based Organization;  Other

Position/Role:

Community/Region:

Please briefly describe why you would like to participate in the Healthy Alaskans Advisory Team or Healthy and Equitable Communities Committee and what skills and strengths you would contribute as a member:

I wish to serve on:

Healthy Alaskans 2030 Advisory Team;  Healthy & Equitable Communities Committee;  Both

**Membership agreement for Healthy Alaskans 2030 Advisory Team and Healthy & Equitable Community Committee.**

1. Attend all meetings (minimum of 4 and maximum of 12 virtual or in-person per year).
2. Dedicate an average of 2 hours each month on activities related to HA2030 and/or the Healthy and Equitable Communities Strategic Plan, including but not limited to active preparation for and participation in monthly and special ad hoc Advisory Team meetings, presentations to stakeholders and the public, participation in implementation activities, and/or providing structured and specific feedback on requests as needed.
3. Contribute to the discussions by sharing knowledge, perspectives, ideas.
4. Serve as an active champion of Healthy Alaskans and the Healthy and Equitable Communities Strategic Plan, in your work and in your community.
5. Discuss and address any questions, concerns, knowledge, and ideas that arise from the community.
6. Maintain an independent, open mind and stay focused on solutions that can be implemented in Alaska communities.
7. Help recruit new members you believe would be good candidates for either committee when there is a current or upcoming vacancy on the committee.
8. Participate on a subcommittee, implementation team, or ad-hoc working group.
9. Regularly review data reports that include relevant Healthy Alaskans 2030 indicators identified in the strategic plan and other relevant data identified by the committee and/or DPH or ANTHC staff to inform the group's discussions and decisions.

An honorarium may be available to support members who are not otherwise compensated through their organization for their participation in the Advisory Team or Committee.

I wish to receive an honorarium because I am not compensated for my participation and time by my job or other organization.

**I commit to being a member of the Healthy Alaskans 2030 Advisory Team and/or Healthy & Equitable Communities Committee and to the items outlined above. During my 2-year term, if I should need to terminate my membership for any reason, I will notify the Healthy Alaskans Core Team representatives and/or Committee Chair.**

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**Print Name**

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**Signature**

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**Date**

Please send completed applications to: [Healthyalaskans@alaska.gov](mailto:Healthyalaskans@alaska.gov) by Wednesday, February 15<sup>th</sup> 2023