Email the completed Nomination Form no later than February 15th, 2021 to the Chair of the Nominating Committee, at nominations@isacany.org. You will receive a confirmation email signifying receipt of your application within five business days following the date of email submission. If you have any questions or need additional information, please do not hesitate to contact the Chair of the Nominating Committee, at nominations@isacany.org. The Nominating Committee will review all nominee applications, and then will present the slate of all qualified candidates for the upcoming Chapter election to be held in Spring 2021. Completion and submission of the Nomination Form provides an opportunity to be considered for a Chapter Board position, and does not imply or guarantee that you will be included on the election ballot nor have a position on the Chapter Board of Directors. For information on the qualifications, terms, and responsibilities of Officers and Directors serving on the Chapter Board of Directors, please refer to Article VI. “Chapter Board” and Article V. “Chapter Officers” of the Chapter Bylaws posted [on our website](https://engage.isaca.org/newyorkmetropolitanchapter/aboutchapter/bylaws). For information on the nomination and election processes, please refer to Article VII “Nominations and Elections” of the Chapter Bylaws..

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| NOMINEE PROFILE | | |
| Name | |  |
| Application for  Board Position | | Director for One-Year Term:  Officer for Two-Year Term:  Specify Position: |
| Nominated by | | Self  Other Person, Specify Name:  ISACA ID #:  ISACA Chapter:  Telephone:  Email: |
| ISACA Membership | ISACA ID # | (If you do not know your ID #, you can find it by viewing your member profile at www.isaca.org/profile) |
| Date Joined |  |
| Member in Good Standing | I have been a member in good standing of the ISACA Association and Chapter, as outlined in Article III of the Chapter Bylaws.  I have followed the ISACA Code of Professional Ethics.  My ISACA Association and Chapter membership dues are paid and current.  I have signified my consent to the Willingness to Serve Statement at the end of this form.  I have signified my consent to the Conflict of Interest and Disclosure Statement at the end of this form. |
| Home Information | Address |  |
| Tel – Home |  |
| Tel - Mobile |  |
| Email |  |
| Work Information | Company |  |
| Address |  |
| Tel - Office |  |
| Tel - Fax |  |
| Email |  |
| Brief Biography (Approximately 250 Words) of Professional Background, Skills, and Experience  (Attach Detailed Resume if Available) | |  |
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| NOMINEE PAST SUPPORT OF ISACA | | |
| Describe your participation in any activities in support of the ISACA Association or an ISACA Chapter, including Volunteer or Chapter Board Subcommittee, Committee, Director, and/or Officer activities. If you have worked with any members of the Chapter Board of Directors, Subcommittees, Committees, or with Volunteers, please note the names of the individuals you have worked with. | |  |
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| NOMINEE FUTURE CONTRIBUTION TO ISACA | | |
| Describe how you intend to make a contribution to the Chapter membership by serving on the Chapter Board of Directors, including specific skills and abilities you would bring to the organization, ideas you may have for organizational improvement and growth, and any areas of interest. | |  |
|  | | |
| OTHER COMMENTS, IF NEEDED | | |
| Please note any other comments in this section. | |  |
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| WILLINGNESS TO SERVE STATEMENT | | |
| Willingness to Serve Statement | | Willingness to Serve Statement  For Applicants to Serve on the ISACA New York Metropolitan Chapter Board of Directors  I have been nominated (or I have volunteered) as a candidate to hold a position on the ISACA New York Metropolitan Chapter Board of Directors for the upcoming Chapter Year, and am willing to serve if elected. I will work to promote the Association, its aims and its purposes, as stated in the ISACA Association Bylaws and the ISACA New York Metropolitan Chapter Bylaws. Furthermore, I understand that if I am qualified to stand for election, my employer will be asked to sign a letter of support for me, and I anticipate no problem in obtaining said letter. I have read and understood the ISACA New York Metropolitan Chapter Bylaws. I understand the insurance plan that has been secured by my Chapter. I also understand that this is a volunteer position, and I will not be paid for any services rendered to the Chapter, unless a special, separate agreement in writing is executed.  I hereby signify my consent to this Willingness to Serve Statement.  Name:  Date: |
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| CONFLICT OF INTEREST AND DISCLOSURE STATEMENT | | |
| Conflict of Interest and Disclosure Staement | | Conflict of Interest and Disclosure Statement  For Applicants to Serve on the ISACA New York Metropolitan Chapter Board of Directors  Philosophy: The ISACA New York Metropolitan Chapter enjoys an excellent reputation in the IT community and the business sector. This reputation depends in large measure upon the confidence that chapter members, the IT community and the business sector have in its integrity. To maintain this confidence, this Chapter has adopted this conflict of interest/disclosure statement. Because the Chapter depends upon voluntary service to achieve its goals, this statement must be realistic and workable. It is recognized that, in the information systems control profession, volunteers have other personal, business, and professional interests or commitments, some of which may have the potential to create conflicts with the best interests of this Chapter. This Chapter does not view the existence of these interests or commitments as necessarily implying bias or an impediment to participation in ISACA Chapter activities.  Duty to Disclose: It is the policy of this Chapter that decisions of Board members, committee/subcommittee members, staff and all other persons acting as representatives of this Chapter should be based solely on the best interests of the Chapter, its membership, the IT community and the business sector. They should never be influenced by desire for personal profit or by other extraneous considerations. Scenarios creating the appearance of a conflict of interest by a Chapter representative should be avoided. Accordingly, this Chapter has adopted the following statement.  Financial Interests: An individual covered by this statement shall make disclosure if that individual or an immediate family member has a material financial interest in any commercial entity that provides products or services related to subject matter that is likely to be considered or is under discussion by a Chapter body (e.g., Board, committee/subcommittee, task force, etc.) on which the individual serves, or is a direct competitor of such a commercial entity.  Other Organizations: An individual covered by this statement shall make disclosure if, within the previous 12 months, that individual has served as a Board or committee/subcommittee member, or has been employed by, consulted for or done research for (a) other professional organizations or (b) any commercial entity that provides products or services related to subject matter that is likely to be considered or is under discussion by a body of the Chapter on which the individual serves, or (c) a commercial or other entity with interests potentially conflicting or competing with those of the Chapter.  Proprietary Information: Among the Chapter’s assets are contracts, documents, educational materials, membership lists and other confidential information developed by the ISACA Association or the Chapter or lawfully acquired from others. These assets are the property of the Chapter. An individual covered by this statement shall not use or disclose them to third parties subject to Chapter policies and procedures, nor shall they utilize this information for any personal gain.  Gifts: An individual covered by this statement shall make disclosure if, within the previous 12 months, that individual or an immediate family member has received support, fees, honoraria, travel expenses, gifts, gratuities, entertainment, or free products or services of a substantial financial value from any commercial entity that provides products or services related to subject matter that is likely to be considered or is under discussion by a Chapter body on which the individual serves, or from a direct competitor of such a commercial entity.  I hereby attest that I have no conflict(s) of interest regarding the above, except as noted as follows:  For purposes of this statement, an individual’s immediate family shall include the individual’s spouse, children, parents and siblings. A material financial interest shall be defined as ownership or beneficial ownership of more than US $10,000 worth of stock or 1 percent of the stock in a commercial entity. The term “substantial” financial value shall be defined as US $1,000 or more in aggregate from any one entity during the previous 12-month period. Each Chapter Board member, committee/subcommittee member or staff member shall file an annual disclosure statement with the chapter. The disclosure statement must be filed at the time of application for nomination, period of standing for election to the Chapter Board, or appointment to a Chapter Board position.  Furthermore, Chapter Board, committee/subcommittee and staff members shall disclose all potentially conflicting interests they identify during their service in a Chapter Board position. An individual who has a possible conflict of interest with respect to a matter under consideration by a Chapter body on which the individual serves shall disclose the possible conflict of interest to the body prior to or during the discussion relating to such matter and, in any event, prior to any action by the body on the matter. The individual shall make this disclosure at the earliest possible time in order to avoid misunderstanding or misrepresentation of the individual’s motives or interests relating to participation in a matter before the body. Individuals holding Chapter Board positions are the Chapter’s most visible representatives with members and outside organizations. For this reason, Chapter Board members are often asked to address member groups and others regarding Chapter or professional issues. To avoid possible confusion or misunderstanding, individuals representing the Chapter who address groups should clearly indicate whether they are speaking as a member of the Chapter Board or as a private individual. Chapter Board members commenting on professional issues, rather than Chapter issues, should indicate to the audience that their comments are based on their perspective as an IS control professional (e.g., “in my capacity as xxx, for the xyz corporation...”).  I have read this Conflict of Interest and Disclosure Statement and support its intent. I recognize that I must disclose any personal interests or commitments I have regarding subjects that are likely to be discussed by the Chapter body on which I serve during the next 12 months. To the best of my knowledge, I do or I do not have interests or commitments that should be disclosed relative to my service on/as a member of the Chapter Board and any committee/subcommittee, task force, or volunteer activity thereof. I have read this Conflict of Interest and Disclosure Statement and I have identified and described any potentially conflicting interests or commitments. If my interests or commitments change during the year or if the subject matter of my group changes and results in my being asked to consider a matter about which I have personal interest or commitment, I agree to file an amended Conflict of Interest and Disclosure Statement at that time. In addition, I recognize that it is my obligation to disclose any personal interests or commitments to the other members of the Chapter body on which I serve at such time as that body discusses subjects related to those personal interests or commitments. I understand that failure to comply with this Conflict of Interest and Disclosure Statement may be considered cause for removal from office, appointment or participation in any Chapter activity or program.  I hereby signify my consent to this Conflict of Interest and Disclosure Statement.  Name:  Date: |