



Application for Appointment to Boards, Committees, and Commissions
City and Borough of Sitka

Board/Commission/Committee: HOSPITAL BOARD
Name: MARY ANN J. HALL Daytime Phone: [REDACTED]
Address: [REDACTED] Evening Phone: SAME
Email Address: _____ Fax Number: _____
Length of Residence in Sitka: 22 yrs Registered to vote in Sitka? ☐ Yes ☐ No
Employer: RETIRED
Organizations you belong to or participate in: HOSPITAL AUXILIARY
HOME HEALTH ADVISORY BOARD HOSPITAL
LOCAL EMERGENCY PLANNING COMM
HOSPITAL FOUNDATION

Explain your main reason for applying:

I WANT TO CONTINUE ON THE HOSPITAL BOARD

What background, experience or credentials will you bring to the board, commission, or committee membership?

I have 30 yrs medical experience including
HOSPITAL CORP OF U.S. NAVY

Please disclose any potential conflicts of interest that may arise from your appointment. These may include but are not limited to:

- A substantial financial interest of \$1000 annually that could be influenced by your appointment.
- An immediate family member employed within the scope of this appointment.

Please attach a letter of interest, outline, or resume which includes your education, work, and volunteer experience that will enhance your membership.

→ (To be considered, your application must be complete AND be accompanied by one of the above supporting documents.)

Date: July 29 2015 Signature: Mary Ann J Hall
Dec 11 2017

Your complete application and resume should be returned to the Municipal Clerk's Office by noon on the Wednesday prior to an advertised Assembly meeting. Applications received after the deadline will be considered but will not be included in the Assembly packets for review prior to appointment.

Please note: all information submitted will be made public and published online. Appointments are normally made during open session of an Assembly meeting, however, Assembly members may vote to discuss applicant(s) in closed executive session. In this case, do you wish to be present when your application is discussed? ☐ Yes ☒ No

Return to:

Melissa Henshaw, Deputy Clerk/Records Specialist, 100 Lincoln Street
Fax: 907-747-7403 Email: melissa.henshaw@cityofsitka.org

on back →

I have trained at the largest research center
in the world for communicable diseases
I have worked for the Center for

Disease Control in Anchorage

I did all the microbiology work for
Indian Health Service at State Road,

My diploma is in Medical Technology

I am a retired lab technician