



**APPLICATION FORM FOR
ADVOCACY, INC.'S
PAIMI ADVISORY COUNCIL
MEMBERS**

If you would like to be considered for a position on Advocacy, Inc.'s PAIMI Advisory Council, please complete the attached application.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Fax: _____

Day Phone: _____ Evening Phone: _____ Cell Phone: _____

Occupation: _____ Employer: _____

Please answer all of the following questions. You may attach additional pages if you need more room to answer.

What is your interest and motivation for serving as a PAIMI Advisory Council member?

Please explain your knowledge of the issues affecting persons with mental health and mental retardation.

Describe your experience in community organizations, including service on boards or advisory committees.

Describe your experience and/or knowledge working with specific underserved communities (e.g., Asian/Pacific Islander, African American, Native American, Spanish speaking, or rural communities).

Describe your experience advocating for people with disabilities, or others.

Describe your leadership or policy development experience.

Are you a member of other disability or civil rights organizations? If so, please identify those groups below.

I live in the Advocacy, Inc. Region identified below: *(Please see attached map.)*

- Central Texas
- North Texas
- South Texas
- East Texas
- West Texas
- El Paso

Advocacy, Inc.'s PAIMI Advisory Council values diversity. In order to assist the Council in selecting diverse Council members, please identify the answers below that best describe you:

Age Group:

- 18-25
- 26-39
- 40-64
- 65+

Ethnicity:

- African American
- Asian/Pacific Islander
- Native Hawaiian or other Pacific Islander
- Hispanic/Latino
- Alaskan Native
- Native American
- White
- Multi-racial
- Decline to state
- Other: _____

Category under which you qualify for the PAIMI Advisory Council: *(Check all that apply)*

- Individual who has received, or is receiving, mental health community-based and/or inpatient mental health services;
- Family member or an individual who has received, or is receiving mental health community-based and/or inpatient mental health services;
- Attorney;
- Mental Health service provider;
- Mental Health professional; or
- Individual from the public who is knowledgeable about mental illness.
- Guardian
- Advocate
- Youth (18 to 25)

No applicant will be granted or denied a seat on Advocacy, Inc.'s PAIMI Advisory Council based solely upon his/her response to these questions.

Where to Send Your Application:

**PAIMI Advisory Council Coordinator
Advocacy, Inc.
7800 Shoal Creek Blvd., Suite 171-E
Austin, Texas 78757
Phone: (512) 454-4816
(800) 252-9108
Fax: (512) 323-0902**

Thank you for your interest in serving on Advocacy, Inc.'s PAIMI Advisory Council. Advocacy, Inc.'s formal Bylaws cover the make-up, duties, powers, terms of office and other details concerning our Council. The Council establishes the duties, powers and terms of office for other positions. The following is a less formal summary of information that is intended to answer frequently asked questions.

Questions about Advocacy, Inc.'s PAIMI Advisory Council?

1. How many people serve on the PAIMI Advisory Council?

Fifteen (15).

2. Who chooses members of the Council?

Members are elected to the Council by the PAIMI Advisory Council from completed applications on file.

3. How long are the terms of each appointment?

The terms of council members shall be staggered. Members are eligible for two (2) three (3) year terms. Persons who have served two (2) terms for a period of six (6) years may not be re-elected to the Council for a period of two (2) years. The Chair may be elected to serve up to six (6) one (1) year terms. The Chair of the PAIMI Advisory Council shall serve on Advocacy, Inc.'s Board of Directors during the term of their qualifying position on the Advisory Council.

4. What are the requirements of Council positions?

In general, members of PAIMI Advisory Council reflect the diverse constituency served by Advocacy, Inc. We are mandated by the Federal PAIMI Act, the purpose of which is to assist states to establish and operate a protection and advocacy system for individuals with mental illness and will protect and advocate for the rights of such individuals through activities to ensure the enforcement of the Constitution, Federal and State statutes. (Under PL 99-319, the Council "...will advise the system on policies and priorities to be carried out in protecting and advocating for the rights of mentally ill individuals...") Persons with mental illness, family members, and professionals are all represented on the Council. Advocacy, Inc. and the PAIMI Advisory Council are also committed to appointing members representative of Texas' diverse ethnic and cultural communities and makes efforts to ensure the Council reflects

different geographic areas of the state.

5. How many Council meetings are held each year, and where are they held?

There are four meetings held a year. Most meetings are held in Austin, TX.

6. How long are the meetings and what other time obligations are there?

Council meetings are scheduled for one each quarter, most always on the second Saturday in October, January, April, and July.

7. What about expenses for PAIMI Advisory Council members?

All travel, room, and Council expenses connected with the Council meetings are paid for by Advocacy, Inc. Advocacy, Inc. also includes reasonable accommodations for Council members with disabilities. Members are not paid an honorarium for their services.

8. Are there any prohibitions regarding appointments?

Generally, if you work for any Texas State Agency or Department (including contract agencies), that provides program services to people with disabilities, you may not be appointed to the Council. A small number of Council members may have an economic or loyalty conflict, and of course, must abstain from voting or deliberating in any action involving whatever causes the conflict.

9. How do I apply for a position on the PAIMI Advisory Council?

You may fill out an application and submit it at any time. Note: You may attach a copy of your resume, and other information or remarks on a separate sheet of paper if you would like to include it with your application. Notices of vacancies are placed on our Advocacy, Inc. website as well as passed along by word of mouth. The application may be printed out from our Advocacy, Inc. website: www.advocacyinc.org. In general, you will be contacted as vacancies occur to give you the opportunity to update your application. Applications are kept on file indefinitely.

10. Where can I get more information?

Please feel free to contact Advocacy, Inc., (512)454-4816 or (800)252-9108.

Your signature (below) is requested as an indication of your commitment to the purpose and responsibilities of the Advisory Council.

(Signature)

Date:

Fragrance Free Policy: *In order to accommodate persons with Multiple Chemical Sensitivity, asthma, or other similar conditions, persons attending the Advocacy, Inc. PAIMI Advisory Council meetings are requested to refrain from using perfume, cologne, and other fragrances, for the comfort of other Council members and other participants.*