



APPLICATION: GMHPN Country Executive Committee

**Refer to the GMHPN Executive Committee's Terms of Reference*

Applicant Contact Information

Title: Name & Surname:

Date of Birth: Affiliation/
Occupation/ Role
in Organisation:

Country: City/ Town:

Contact
Number: Email Address:

Website:

Declaration

| | | |
|--|----------------------------------|---------------------------------|
| I am a person with lived experience | <input type="text" value="YES"/> | <input type="text" value="NO"/> |
| I am fluent in the English language | <input type="text" value="YES"/> | <input type="text" value="NO"/> |
| I am involved in advocacy work at local and/or global level | <input type="text" value="YES"/> | <input type="text" value="NO"/> |
| I have knowledge of mental health structures at country level | <input type="text" value="YES"/> | <input type="text" value="NO"/> |
| I have effective means of communication (email and mobile number) | <input type="text" value="YES"/> | <input type="text" value="NO"/> |
| I am passionate and dedicated to the cause of mental health and improving the quality of life of all mental health care users | <input type="text" value="YES"/> | <input type="text" value="NO"/> |
| I have read through the GMHPN Terms of Reference for the Executive Committee and understand the role and responsibilities involved | <input type="text" value="YES"/> | <input type="text" value="NO"/> |

Biography

Capacity to Execute Activities

Please indicate your capacity to contribute towards some of the key activities of the GMHPN

| | YES | NO |
|--|-----|----|
| Attending quarterly online and other scheduled meetings (online and in-person) | | |
| Respond timeously to any and all communications via email or phone | | |
| Representing GMHPN at country or global-level engagement platforms, events, and other opportunities, such as conferences and relevant consultation processes | | |
| Collaborate with stakeholders and partners in implementation of initiatives | | |
| Promote the GMHPN at all online and public platforms/ events | | |
| Recruit individual lived experience members and organisational members | | |
| Submit monthly feedback on activities | | |
| Sourcing of content for website, newsletter, social media and online platforms | | |
| Disseminate engagement surveys to persons with lived experience and other stakeholders | | |

State your availability and estimate time that you are able to spend on the GMHPN activities

Motivation

Write a motivation as to why you believe that you are suited for the position as a member of the GMHPN Executive Committee representing your country

Social Media/ Online Links

Please list any relevant social media or other online (e.g. videos, articles) links that could provide more information about your interests and work in the mental health field