



Health and Human Services
204 1st Street NW
Aitkin MN 56431



Public Health
Prevent. Promote. Protect.
Aitkin County

Aitkin County Opioid Settlement Subcommittee Application

Personal Information

First Name:			Date:	
Last Name:				
Address:			Phone:	
City State and Zip				
Age Range	<input type="checkbox"/> 15-17 <input type="checkbox"/> 18-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-55 <input type="checkbox"/> 55-65 <input type="checkbox"/> 65 + <input type="checkbox"/> Prefer not to answer			

Application

Residence **How long have you lived in Aitkin County? What do you like the most about living in Aitkin County?**

Community **Have you ever served on any type of committee or board? If your answer is no is there anything about serving on a committee that you have concerns or questions about?**

Motivation **What interests you about becoming a member of this committee?**

Background **Please give a brief overview of your education, past or present employment, and areas of interest or expertise you think you could bring to this committee.**

Connection Have you been impacted by any part of the opioid epidemic? Be as brief or as specific as you would like.

Comments Add any additional comments that you would like the reviewers to be aware of.

Additional Information

It is anticipated that this committee will meet monthly until a consistent process and decision making requirements are in place. At that time the committee will decide what frequency is required to conduct usual business. The meetings will generally be after normal business hours during the work week. The role of the committee is to help guide the spending of the opioid settlement dollars coming into Aitkin County over the next several years. The term on the committee will be for two to three years as to stagger member changes on the committee. It is important that the makeup of our committee reflect a broad representation of our community and bring diverse experiences and backgrounds including those who have been impacted by opioids directly or indirectly, faith-based organizations, law enforcement, healthcare, veterans, youth, education and any underserved portion of our population. Anyone in Aitkin County is encouraged to apply, even if you have never served on a committee of any kind. Please note, there will be a selection process to accept 10-12 applicants.

Next steps:

Selected applicants will be invited to attend our first subcommittee meeting at which time there will discussion and decisions on the committee’s Rules of Engagement and meeting cadence. All members will be asked to sign a Conflict of Interest Agreement.

Tentative Committee timelines:

Application deadline is July 15th

Selection complete August 1st

First Meeting September

To be signed by applicant:

I have sufficient time to devote to this responsibility and will attend the required meetings if appointed.

Applicants Printed Name	Applicant Signature	Date
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If you have any questions or would like to discuss this application further please contact: Liz Short PHN
Aitkin County Health and Human Services
204 1st Street NW Aitkin MN 56431
Office: 218-927-7267

Completed applications can be mailed to the above address or
Emailed to: public-health@co.atikin.mn.us (Please put the word “Application” in the subject line)