



# Clinician Task Force Membership Application 2019

## Our Mission

To provide clinical based expertise to inform and promote public policy, best practices, and positive outcomes regarding people with disabilities who require seating, positioning, and mobility products and related services.

## Our Purpose

The CTF was formed out of a need for a viable forum to gather opinions and recommendations from the leaders in the clinical community in order to formulate position papers and responses and submit them to policy makers, government officials and Congress in a timely responsive manner. It has evolved into a group of seating and wheeled mobility leaders who are also passionate about promoting clinical best practices and increasing clinical capacity in Occupational Therapy and Physical Therapy fields.

As a volunteer task force, funded by voluntary donations, the CTF is established to fulfill the stated mission and purpose. The Executive Board is responsible for leadership, direction, and oversight of CTF priorities, activities, and funds. The work that is needed to affect change, provide evidence, support end-users and interface effectively with suppliers and third- party payors and government has become increasingly more complex. We are requiring all CTF members to make a formal commitment to produce tangible intervention and outcomes to meet the goals of the task force. Each member must commit to joining at least one work group and must be willing to offer a minimum of five hours to that work group. Members may be asked to leave the CTF if they are unable to abide by this requirement.

## Our Membership

The CTF seeks to engage qualified clinicians to carry out the mission and purpose of our group. Membership to the CTF is considered through nominations from CTF members. The Executive Board reviews all applications for membership against the eligibility criteria. Upon approval, all members are required to review the CTF Operating Manual and sign an annual Membership Agreement. To maintain the credibility of the CTF as a voice of practicing independent clinicians, CTF membership shall be comprised of no more than 20% of clinicians with full-time commercial interests.

## Personal Information

**Name, Credentials as will appear on CTF roster** (example PT, PhD, ATP/SMS)

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**Title** \_\_\_\_\_

**Affiliation/Organization** \_\_\_\_\_

**City, State** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**Telephone & Extension** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Memberships/Board Appointments/Fellow Awards** (RESNA, FON, APTA, AOTA, etc.)

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**Years of experience practicing seating and mobility** \_\_\_\_\_

## Personal Statement

Please submit a brief personal statement describing your involvement, participation and experience in advocacy activities including a statement of why you would like to join the CTF.