EXPECTEDATIONS OF THE BOARD AS A WHOLE
The mission of the Wyoming Montana Safety Council is to prevent incidents and injuries at work, home and in the community by providing high quality safety related education and information.

As the highest leadership body of the organization and to satisfy its fiduciary duties, the board is responsible for

- determining the mission and purposes of the organization
- selecting and evaluating the performance of the CEO/executive director
- strategic and organizational planning
- ensuring strong fiduciary oversight and financial management
- helping identify clients and resource development
- approving and monitoring WMSC's programs and services
- enhancing WMSC's public image
- assessing its own performance as the governing body of WMSC.

EXPECTEDATIONS OF INDIVIDUAL BOARD MEMBERS
Each individual board member is expected to

- know the organization's mission, policies, programs, and needs
- faithfully read and understand the organization's financial statements
- serve as active advocates and ambassadors for the organization and fully engage in identifying and securing the financial resources and partnerships necessary for WMSC to advance its mission
- leverage connections, networks, and resources to develop collective action to fully achieve WMSC's mission
- help identify personal connections that can benefit the organization's services and reputational standing.
- prepare for, attend, and conscientiously participate in board meetings
- participate fully in one or more committees

BOARD MEMBERS ARE ALSO EXPECTED TO

- follow the organization's bylaws, policies, and board resolutions
- sign an annual conflict-of-interest disclosure and update it during the year if necessary, as well as disclose potential conflicts before meetings and actual conflicts during meetings
- maintain confidentiality about all internal matters of WMSC

General Terms

- Board Terms are three years. Board members can serve no more than two three-year terms consecutively. Terms run annually from July 1 through June 30. A person filling an existing term is eligible to fill two additional full terms.
- Board meetings are held quarterly in-person either centrally or on a rotating basis around Wyoming.
- One or more additional planning/retreat meetings may be held during the year at a location chosen by the board.
CONFLICT OF INTEREST DISCLOSURE STATEMENT

I, __________, recognize that as [a member of the Board of Directors] [a member of the Board of Trustees] [an officer] [a senior staff employee] [an agent] of the Council, I owe duties of care and loyalty to the Council. One aspect of fulfilling those duties is to avoid conflicts of interest with respect to the interests of persons, products, or entities that are the subjects of the particular Council activities or proceedings in which the Covered Person is involved. To help avoid conflicts, on this form I am disclosing situations or areas in which it might even appear that I have conflicting duties to other persons, products, or entities. I invite further review by the Council of any aspects of these situations or areas that be considered appropriate. In addition, I will take other steps, such as avoiding deliberation and resolution of certain issues or even withdrawing from my position in the Council, if it is determined that those steps are necessary to protect against legal liability to the Council or to me arising from conflicts of interest.

Please complete all of the following that apply and attach additional pages if necessary.

1. Professional, business, or volunteer positions or responsibilities that might give rise to conflicts:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. Situations in which I am serving as a vendor or customer, or am employed by or consulting with a vendor or customer, to the Council or its members:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. I know of no professional, business, or volunteer position or responsibility, including vendor/customer situations that might give rise to conflicts (check here): ________

________________________________________________________________________

_________________________________  __________________________
Signature                                     Date