

Indigenous Partnership Council – Application Form

Background

Public Health Ontario (PHO) is establishing an Indigenous Partnership Council to provide expert, community-based advice, guidance, and recommendations to build PHO’s Indigenous Strategy. This strategy will be the actions PHO will take to enhance Indigenous Public Health in Ontario. The Council will work collaboratively to ensure Indigenous voices are leading the direction of public health initiatives that impact Indigenous people.

The Council will consist of ten members who reflect Ontario’s diversity of Indigenous communities, languages, and geography, as well as diversity of lived experience and connection to community. Membership terms are two years, with the option for renewal, and members are expected to meet quarterly via videoconference, with one annual in-person meeting. A stipend will be paid to members and travel expenses will be covered. For more information on the Council, visit the [Indigenous Partnership Council](#) webpage.

If you are interested in applying, please complete this form and submit it, along with a copy of your résumé/ CV, by email to Indigenous.Strategy@oahpp.ca by June 19, 2026.

Section 1: Personal Information

Name:	<input type="text"/>	Phone:	<input type="text"/>
Email:	<input type="text"/>	Place of Residence:	<input type="text"/>

Indicate your Indigenous identity (select all that apply). *Please note that Indigenous identity may be verified.*

First Nations

Inuit

Métis

Other (please specify):

Please share what you are comfortable sharing. Information provided will be viewed solely by those reviewing applications to help ensure a diverse Partnership Council. Please note that Public Health Ontario is required to securely retain application materials for 3 years, in accordance with the Employment Standards Act.

Section 2: Relationship to Community

In less than 200 words, please detail your relationship to your Indigenous community.

Section 3: Skills & Experience

In less than 200 words, what relevant skills and experiences would you bring to the work of the Indigenous Partnership Council? *Examples may include governance, advocacy, relationship development, public health expertise, communication, culture, collaboration, etc.*

In less than 300 words, please share why you are interested in participating in Public Health Ontario’s Indigenous Partnership Council?

Please select yes or no:

- | | | |
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| Yes | No | Do you have experience working with health, public health, or community-based organizations? |
| Yes | No | Are you able to commit to attending at least 4 virtual and 1 in-person meeting per year? |
| Yes | No | Are you comfortable participating in virtual meetings (i.e., Microsoft Teams) as needed? |

Section 4: Lived Experience (Optional Disclosure)

PHO is committed to ensuring the Council represents the diversity of lived experiences within Indigenous communities across Ontario. If you are comfortable, please indicate which lived experiences apply to you (select all that apply):

2SLGBTQIA+

Disability

Rural or remote community experience

Urban Indigenous experience

Youth (under 30)

Elder

Knowledge Keeper

Other lived experience you'd like to share:

Thank you for applying. We welcome your reflections and questions and look forward to continuing this work in partnership. For more information, please contact Indigenous.Strategy@oahpp.ca.