

**EL PASO COUNTY HOSPITAL DISTRICT  
BOARD MEMBER PLEDGE**

I \_\_\_\_\_, recognizing the important responsibility I am undertaking as a Member of the Board of Managers of the El Paso County Hospital District, hereby personally pledge to carry out in a trustworthy and diligent manner, all the duties and obligations inherent in my role as a Board Member.

**My Role:**

I acknowledge that my primary role as a Board Member is to contribute to the promotion of the El Paso County Hospital District mission and to carry out the functions of the office of Board Member and/or Officer as described in the Bylaws of the Board of Managers of the El Paso County Hospital District.

**My Commitment:**

I will exercise the duties and responsibilities of this office with integrity, professionalism, collegiality and due care.

**Pledge:**

I will represent the El Paso County Hospital District in a positive and supportive manner at all times and in all places unless there is an issue that may compromise the well being of our community residents, in which case I may speak as an individual board member or concerned citizen.

I will exercise my right to voice my opinions and recommendations regarding Hospital District matters, and will respect the rights of other Board members to voice their opinions and recommendations.

I will always act for the good of the community.

I will be prepared to discuss the issues and business addressed at scheduled meetings, having read the agenda and all background material relevant to the topics at hand.

I will support in a positive manner all actions taken by the Board of Managers provided that I reserve the right to voice a dissenting point a view without fear of retribution.

I will observe the parliamentary procedures and display courteous conduct at all board and committee meetings.

I agree not to divulge or distribute any confidential information or records I may encounter during the performance of my duties with EPCHD. I agree that any discussions, records and information that I have access to in connection with these activities will not be disclosed to any unauthorized person.

I agree not to speak on behalf of the El Paso County Hospital District without the authorization of the Board of Managers. I may speak as an individual Board member or a concerned citizen.

I am committed to acting honestly, in accordance with the letter and spirit of all applicable laws and regulations, as well as internal policies governing the affairs of the Hospital District.

I agree that if I am absent from three (3) consecutive meetings of the Board of Managers, or from three (3) consecutive meetings of any committee of which I am a member, I will resign from the Board or that Committee unless my absence has been excused for reasonable cause by the Chairperson of the Board.

I agree to resign from the Board in the event of the revocation of any professional license which I may hold for either professional misconduct or fraud.

I agree to uphold the Bylaws of the El Paso County Hospital District.

I affirm that I have been provided a copy of the El Paso County Code of Ethics and the Hospital District Code of Conduct and that I have read these documents and that I pledge to comply with the ethical standards set forth therein.

I affirm that I have read and I understand this pledge and I promise to comply and faithfully discharge the duties, responsibilities, and obligations set forth herein.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Board Member: \_\_\_\_\_