

Director Regions 5 & 7

Nomination Form

The following nomination is hereby submitted for the 2024 election to the NANB Board of Directors. The nominee has granted permission to submit her or his name and has consented to serve if elected. All of the required documents accompany this form.

Position:

Candidate's name:

Registration number:

Address:

Telephone: Home/work:

Nominator #1:

Name:

Signature:

Registration Number:

Nominator #2:

Name:

Signature :

Registration Number:

Nomination forms must be postmarked no later than March 1, 2024. Return to Nominating Committee, Nurses Association of New Brunswick, 165 Regent Street Fredericton, NB, E3B 7B4.

Acceptance of Nomination

(The following information must be returned by nominee)

Declaration of Acceptance

I, _____ a nurse in good standing with the Nurses Association of New Brunswick, hereby accept nomination for election to the position of _____

If elected, I consent to serve in the foregoing capacity until my term is completed.

Signature :

Registration Number:

Biographical sketch of nominee

Please attach separate sheets when providing the following information:

- basic nursing education, including institution and year of graduation;
- additional education;
- employment history, including position, employer and year;
- professional activities; and
- other activities.

Reason for accepting nomination

Please include a brief statement of no more than 75 words explaining why you accepted the nomination.

Photo

For publication use, please forward an electronic self-image to jwhitehead@nanb.nb.ca.

Return all of the above information to: NANB, 165 Regent Street Fredericton, NB, E3B 7B4. Information must be postmarked no later than March 1, 2024.