Chapter Officer Nomination Petition SEILL

| Candidate's Name | | 121RN |
|---|--|---------------------------------------|
| Hospital | | Nurse Alliance |
| Dept./Unit | Shift | |
| We, the undersigned me us in the following capa | and the state of t | nate our co-worker to represent |
| President | ☐ Vice-President | Secretary-Treasurer |
| | d Union Stewards to strengthen our Un nd improve conditions for ourselves an | |
| Name | Signature | Unit |
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| I accept the nomination | on and. if elected. agree to upho | old the responsibilities of the role: |
| | YES NO | |
| Candidate's Signature | | Date |
| Cell phone # | | |
| Personal email addres | s | |