Bargaining Team Nomination Petition

Bargaining Team Nomination Petition				
Candidate's Name				-121RN
Your Name		.Hospital		Nurse Alliance
Dept./Unit		Shift		_
If you're passionate dedication and o			to be recognized out a nomination	
Nomination	Petition			
 Nominations for Barga by no fewer than ten (1 			21RN shall be made by	means of a petition signed
Nomination petitions m	rust be received b	y May 7, 2015 in ord	er to be valid.	
We, the undersigned member represent us as a member of			didate above to	
Name	Signat	ture		Unit
1				
2				
3				
4				
4				
5				
6				
7				
8				
9				
10				
I accept the nomination a	and, if elected ☐ YES		the responsibilitie	s of the role:
Candidate's Signature	_	_	Date	
Cell phone #				