



CONSENT-TO-SERVE AS CHAPTER OFFICER

Return To SCNA by: Email: rosie@scnurses.org

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Mail: SCNA, 1821 Gadsden Street, Columbia, South Carolina, 29201

- Chapter Name:
- Appalachia Chapter
 - Edisto Chapter
 - Piedmont Chapter
 - Advanced Practice Registered Nurse Chapter
 - Community and Public Health Chapter
 - Nurse Educator Chapter
 - Psychiatric/Mental Health Chapter
 - Women and Children's Health Chapter

- Chapter Office Nominated For:
- | | |
|--|-------------------------------------|
| Even Year Elections | Odd Year Elections |
| <input type="checkbox"/> Chair | <input type="checkbox"/> Vice Chair |
| <input type="checkbox"/> Member At Large | <input type="checkbox"/> Secretary |
| | <input type="checkbox"/> Treasurer |

NAME _____

PHONES: (O) _____

ADDRESS _____

(H) _____

FAX _____

EMAIL _____

CURRENT TITLE _____

EMPLOYER _____

EDUCATION: (circle highest level attained) A.D., Diploma, B.S.N., M.S.N., Ph.D, Other Masters _____ Other Doctorate _____

CURRENT AND PAST SCNA/CHAPTER ACTIVITIES: _____

BRIEF STATEMENT OF WHY YOU ARE RUNNING FOR THIS OFFICE(S): _____

IF ELECTED, I CONSENT-TO-SERVE AS AN OFFICER OF THE CHAPTER(S) INDICATED ABOVE. I REALIZE MY CONSENT INCLUDES THE OBLIGATION TO ATTEND THE MEETINGS AND PARTICIPATE ACTIVELY AS A CHAPTER MEMBER.

DATE _____ SIGNATURE _____ 5/2008