



Canadian Society of Gastroenterology Nurses & Associates  
Société canadienne des infirmières et infirmiers en gastroentérologie et travailleurs associés

## NOMINATION FORM FOR NATIONAL BOARD POSITION

Please complete this form and submit to the Chair of the Nominations Committee (presently CSGNA President) by March 31st of the year you are nominated and provide your Curriculum Vitae (CV) to the National Secretary.

Nomination forms may be returned by mail to:  
CSGNA National Office  
#224, 1540 Cornwall Road  
Oakville, ON L6J 7W5

Nominations forms may be sent by FAX to: 905-829-0242 or e-mail to: [president@csgna.com](mailto:president@csgna.com)  
CVs must be sent to the National Secretary by email to: [secretary@CSGNA.com](mailto:secretary@CSGNA.com)  
Ballots will be sent to members by May 15.

Nominee: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (W) \_\_\_\_\_ (H) \_\_\_\_\_

Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Credentials: \_\_\_\_\_

CSGNA continuous membership since: \_\_\_\_\_

Chapter/National positions held: \_\_\_\_\_

CSGNA Committee participation: \_\_\_\_\_

Other related activities: \_\_\_\_\_

Position for which you are accepting nomination: \_\_\_\_\_

Your reasons(s) for submitting your nomination for National Office:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provide attachment if you wish to add more information.

Nominee's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Nominators: \_\_\_\_\_ and \_\_\_\_\_