

Call for Nominations of Elected Board Members

In accordance with Section 23 of the By-laws, election of LPNs to the Board shall be held. The below stated position is now open for nominations.

Zone 4

1 Position - 3 year term (January 1, 2012 – December 31, 2014)

Licenseses of the College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNNL) are invited to submit names of nominees, from their Zones for election to the Board.

NOMINATION FORM – BOARD MEMBERS	ACCEPTANCE OF NOMINATION
<p>I, _____ a member in good standing of the CLPNNL, residing in <u>Zone 4</u> do hereby nominate the following person from <u>Zone 4</u> for election to the Board of CLPNNL.</p> <p>Name _____ <div style="text-align: center; font-size: small;">Nominee</div></p> <p>Address _____ <div style="text-align: center; font-size: small;">Number and Street</div></p> <p>_____ City/Town _____ Postal Code</p> <p>License Number _____</p> <p>To serve in this capacity for the term specified above,</p> <p>Signed this ____ day of _____, 2011.</p> <p>Signature _____ <div style="text-align: center; font-size: small;">Nominating Member</div></p>	<p>I, _____ a member in good standing of the CLPNNL, residing in <u>Zone 4</u> do hereby accept nomination for election to the Board of CLPNNL.</p> <p>Name _____</p> <p>License Number _____</p> <p>Signed this ____ day of _____, 2011.</p> <p>Signature _____ <div style="text-align: center; font-size: small;">Nominee</div></p>

Rules and Procedures for Nomination of LPNs for election to the Board of CLPNNL:

1. **All nominations received for election to the Board must be accompanied with a resume of nominee to be eligible.**
2. Nominations which have been altered or changed must be initialed by both the nominee and nominator.
3. To be eligible the original nomination forms or previously faxed forms for nominees must be received by the College on or before the established deadline.
4. All licensees who are in good standing at the time of the election are entitled to vote as per Section 19 of the By-laws.

Deadline for acceptance of the original copy of the completed nomination forms is October 19, 2011 at 1630 hrs.

Return completed nomination form to:
 College of Licensed Practical Nurses of Newfoundland and Labrador
 9 Paton Street
 St. John's, NL A1B 4S8

Nominee – Zone 4

Name: _____

License #: _____

RESUME

Educational Back Ground:

Work History:

Previous Experience with Committee and/or Board Participation:

Personal Statement:

Nominee's Signature

Date