

Nomination Form for APPNA Board of Trustees (BOT) Elections 2018

Ruh Afza Afridi, MD

Chair APPNA Nomination and Election Committee 2018

Dated:

I, _____, nominate Dr. _____
of _____ (City & State) to serve on the APPNA BOT for a 4-year term starting
January 1, 2019.

Regards

Signed

Address:

Email:

Phone:

Note: The person nominating should fulfill the following qualifications:

1. Be an active member of APPNA.
2. Belong to the same Region as the nominee contesting the election.

Regional Map:

