



# President Elect Nominations Form



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## Professional Biography

Your work history, place of employment, professional activities, committee activities, education and other things you want voters to know about you.

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## Personal Information

Voluntary/service activities, personal interests, hobbies and other things you want voters to know about you.

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I, \_\_\_\_\_, declare my intention to run for President Elect and that I am a practicing LPN in good standing with the SALPN.

Date \_\_\_\_\_ Signature \_\_\_\_\_

### Completed forms can be mailed to the SALPN office at:

Saskatchewan Association of Licensed Practical Nurses ATTN: Nominations  
700A – 4400 4th Ave  
Regina, SK S4T0H8  
Email [info@salpn.com](mailto:info@salpn.com)  
Fax • 306-347-7784

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