

**2018 - 2019 CALL FOR AAPL BOARD NOMINATIONS**

INDICATE THE POSITION FOR WHICH THIS FORM IS BEING SUBMITTED

[ ]  President-Elect

[ ]  Treasurer

[ ]  Director (4)

**President-Elect** shall fulfill the duties of the President at the request of the President or in the absence or inability of the President to act. When so acting, he or she shall have the powers of the President. This officer will subsequently serve the following 2 years as President and the Past President. Must have prior AAPL board experience.

**Treasurer** shall have charge and custody of all funds and securities of the Association and shall ensure that proper deposits are made in the name of AAPL. The Treasurer shall keep and maintain adequate accounts of all business transactions including assets, liabilities, receipts, disbursements as well as State of TN and Federal tax reports. The Treasurer shall prepare and present a financial report at meetings of the Board of Directors and at the annual meeting of the members.

**At-Large Directors** shall be responsible for participating in all board meetings and association activities. It is understood that chairing a minimum of one (1) committee will be a responsibility of this position. (4) positions to be filled.

[ ]  Nomination of a Colleague

[ ]  Self-Nomination

Name: Employer:

Employer City/State:Member since: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[**Click here**](https://aapl.wildapricot.org/Resources/Documents/AAPL_Bylaws_Updated_April%202016.pdf) **to read and review the AAPL Bylaws. □ I have read the AAPL Bylaws.**

Explain why you (or your nominee) would be a good candidate.

List how you (or your nominee) have served or participated in AAPL.

Will your employer (or your nominee’s) support the time you will need to invest in AAPL Board activities (Board and committee calls, attendance at the Annual Conference)? [ ]  **Yes** [ ]  **No** [ ]  **Ask my Nominee**

Have you (or your nominee) attended at least two educational events such as AAPL Annual Conferences or Regional Meetings?[ ] **Yes (please list)**  [ ] **No** [ ]  **Ask my Nominee**

1. (city, state and year) 2. \_\_ (city, state and year)

Will you (or your nominee) be attending the upcoming AAPL Annual Conference this June? [ ] **Yes** [ ] **No**

Please complete and email this form to our Nominating Committee Chair, James Finnen at james.finnen@bswhealth.org and copy AAPL at contactaapl@gmail.com. If you are self-nominating, please send a digital headshot and 200-word maximum biographical statement to be used on the final ballot. If you have any questions, please contact the AAPL offices at 571-402-2275. **Deadline: March 9, 2018**

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