

Illinois Nurses Association 911 South 2<sup>nd</sup> St Springfield, IL 62704 217-523-0783

## RC-23 CONSENT TO SERVE FORM

For: Board of Directors and Committee Members

## Please type or neatly print. Return the completed form to:

INA, 911 South 2<sup>nd</sup> St Springfield, IL 62704 or Fax: 217-523-0838 or Email: Staci@illinoisnurses.com

MEMBER INFORMATION		
Name: Street Address:		
City:	State:	Zip:
Cell Phone:	Facility/Work L	
Email:	r domey/vvoik E	oddion.
(NOTE: Proficiency with use of e-mail, MS Wo	ord and PDF software, while not a requirement to Committees do communicate regularly and cond	o run or hold INA office, it is highly recommended fuct some business electronically.)
	lease state your highest nursing degree, non-nu	rsing education & where you attended school.
☐ Diploma	☐ Masters	
☐ Associate Degree	Doctorate	
☐ Baccalaureate	☐ Non-Nsg. Educ	cation
PROFESSIONAL EXPERIENCE	CE	
Present Position:		
Employer:	Dates:	
If not presently employed in nursing	ng, please list your present occupa	ion:
Employer:	Dates:	
between as necessary): Exercise transact the business of INA/RC2 of 15 members with a representat	kimately five 1-day meetings/year, where the corporate responsibilities and 3 between meetings. The INA/RC2 ive member from each agency (if pery 2 years during the annual meetings)	fiduciary duties of INA/RC23 and 23 Board of Directors is comprised ossible). A board member serves a
Agency Representing: I would like to be considered for	or the following positions (please	place an X in the box):
☐ Dept of Human Services	□ Dept of Corrections	☐ At Large
<ul><li>Dept of Veterans Affairs</li></ul>	☐ Dept of Healthcare & Family Services	
•	•	
☐ Dept of Public Health	☐ Dept of Child & Family Service	es
COMMITTEE APPOINTMENT	<b>S:</b> or the following positions (please	place an X in the box):
☐ Membership	□ Communications	☐ Finance
□ Legislation		
	ByLaws	Nomination

## **FACILITY UNION STEWARD:**

I would like to be considered as a union steward at my facility. (please place an X in the box)
☐ Union steward
Print your name as it should appear on the ballot:
Candidate's Statement to include: Title and Date(s) of: Past and/or present positions and any awards received from INA or your Local Unit. (Please type or neatly print.)
Information on this page will be used by INA/RC23 to prepare the ballot. To be placed on the ballot, you must complete a consent-to-serve form and submit it by the submission deadline. If your name does not appear on the ballot and you still wish to be a candidate, you may self-declare as a candidate by notifying INA Headquarters and completing a consent-to-serve form prior to the stated deadline for self-declared candidates.
If elected or appointed to the INA/RC23 Board of Directors, Committee Member or Union Steward, it is my obligation to attend meetings. If I am unable to fulfill this commitment, I will resign.
Signature:Date: