

Nebraska Association of Perianesthesia Nurses

"Willingness To Serve Form"

I am willing to serve as:  
ELECTED POSITION:

Terms

- \_\_\_\_\_ Vice President / President Elect,  
(Followed by one year each President & Presidential Advisor) Two years
- \_\_\_\_\_ Secretary Two years
- \_\_\_\_\_ Treasurer Two years
- \_\_\_\_\_ Executive Member-at-Large (three needed) Two years

NAPAN Committee Member:

- \_\_\_\_\_ Bylaws/Policy & Procedure Committee One year
- \_\_\_\_\_ Education Committee One year
- \_\_\_\_\_ Finance Committee One year
- \_\_\_\_\_ Governmental Affairs Committee One year
- \_\_\_\_\_ Membership Committee One year
- \_\_\_\_\_ Nominating Committee One year
- \_\_\_\_\_ Publications Committee One year
- \_\_\_\_\_ *Nappin' News* Editor One year
- \_\_\_\_\_ Research Committee One year

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_ \_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

e-rail \_\_\_\_\_

Facility: \_\_\_\_\_ City: \_\_\_\_\_

***I understand the duties and responsibilities of this position.***

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

Return completed form to Nominating Committee Chairperson or President.