ALHFAM Recommendation for Nomination

The ALHFAM Nominating Committee encourages members to recommend individuals for elected and appointed positions and accepts self-nominations. All nominees must be individual ALHFAM members in good standing.

Please complete a separate form for each person you nominate.

RETURN via email to the VP/ Nominating Chair: vp@alhfam.org

Suggested Nominee:	
Title:	
Affiliation:	
Address:	
City:State	e/Province/County:
Zip/Postal Code:	Telephone: ()
	Home/Cell phone: ()
ALHFAM position for which the individual is a	suggested nominee: (please check one)
Vice PresidentSecretary/Treas	surerBoardNominating Committee
Is this person an ALHFAM individual member (as required by the ALHFAM Bylaws)	in good standing?YesNo
wity i believe this person should be selected a	as a Nominee (Use additional pages if necessary):
Individual submitting this suggested nominee Affiliation:	:
	Email:

Submissions of Recommendation for Nomination are welcome at any time.