

Hong Kong Cardiac Nursing Association Ltd 香港心臟護理學會有限公司

Nomination Form for Directors of the Board of Hong Kong Cardiac Nursing Association Ltd

I would like to nominate			(name of nominee)
from	(name of institution) to stand for the		
upcoming election of Boa	ord Members for the y	ear 2018-2020.	
	Member's Name	Institution	Rank
Proposed by the			
Director currently in			
Office			
Seconded by the			
Director currently in			
Office			
(Each Director can propos	se not more than 2 no	minations for the	election)
Signature (Proposer):		Date:	
The followings should be	completed by the no	minee:	
I agree to be nominated t	•		Δ
ragice to be nonmatea t	o ran for the Birector	Cicotion Cacreio	··
Cianatura (Naminaa).		Data	
Signature (Nominee):		Date:	
		_	
Please provide a brief des	scription to members	for supporting yo	our election (optional
but not more than 100 w	ords):		
Photo provided: yes (please scan your pho	to if replied by er	 mail) □ no

Please return the completed form on or before **June 16, 2018** by email to: <u>hkcardiacnursingassociation@qmail.com</u> or by postal mail to: The Hong Kong Cardiac Nursing Association, P.O. Box 9447, General Post Office Hong Kong