

## Biographical Data Form 2020 Election - Deadline February 27, 2020

Office Sought (Please check one):
☐President-Elect (2020-2021)#*
☐Treasurer (2020-2022)*
☐Board of Directors – 3 to be elected (2020-2022)*
■Nominating Committee – 5 to be elected (2020-2021)*
☐Delegate – 20 to be elected (2020-2022)*
Personal Information
Full name
Nursing Credentials
Home address, city, state, zip
Home phone
Mobile or cell phone
Personal e-mail address
Business Information
Organization
Business address, city, state, zip
Business phone
Business e-mail address
Professional Education (List most recent first)
Name of School
City, State of School
Degree received and year
Name of School
City, State of School
Degree received and year
Professional Nursing Experience
Title of Present Position
Titles of Previous Positions (5- 10 year span)

**Present TNA Offices:** 



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District
State
National
Past TNA Offices:
District
State
National
National
Other Organization Memberships and Offices held presently:
Local
State
National
Other Organization Memberships and Offices held in the past:
Local
State
National
Civic or Community Involvement (Please list and/or describe activities and dates of service)
Present:
Past:
Provide a brief explanation of why you should be elected to this Office:
If Elected, I Consent to Serve in the Above Office:
Signed:
Date:

If completing this via hard copy, must be received by February 27<sup>th</sup> by email to <a href="mailto:tna9@tnadistrict9.com">tna9@tnadistrict9.com</a> or by postal mail to address below:

## **Nominating Committee Chair**

Texas Nurses Association, District 9 7324 Southwest Freeway, Suite 1453 Houston, TX 77074