



# Council Board Nomination Form



Received by no later than 5 p.m. Wednesday, October 24, 2007 at:

SEIU Healthcare District 1199WI  
2001 W. Beltline Hwy Suite 201  
Madison WI 53713-2366  
Fax: 608-270-2025

TO: Meriter Nominating Committee – SEIU Healthcare District 1199WI

FROM: \_\_\_\_\_

RE: **Nominations for Meriter Nurses' Council Board and Co-Chair**

DATE: \_\_\_\_\_

Please consider this as my request to be nominated for the Meriter Nurses' Council Board or as Meriter Nurses' Council Co-Chair (check all that apply):

- Meriter Nurses' Council Co-chair (2-year term)
- Meriter Nurses' Council Board Member (2-year term)
- Meriter Nurses' Council Board Member (1-year term)

Below is the biographical information called for in the Bylaws, Article VI, E (2):

My professional experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My previous Union activity: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My Work Unit: \_\_\_\_\_

My reason for seeking election: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This form must be received in the District Union Office by no later than 5 p.m. on Wednesday, October 24, 2007.**