

**NOMINATION and Consent to Run and Serve Form**

**DUE by 4 p.m. on Monday, Feb. 5, 2018**

*Please try to gather a signature from every nurse you nominate, including yourself. We must have a signature (which serves as a consent to serve) from each nominee before their name can appear on the ballot. Submit this form by fax to ONA at 503-293-0013, or scan or photograph it and email it to Maureen Smith at [Smith@OregonRN.org](mailto:Smith@OregonRN.org).*

| Position   | Nominee | Nominee's Home Unit | Signature—<br>Consent to Serve |
|--|---------|---------------------|--------------------------------|
| Rehab —<br>Nurse Staffing<br>Committee<br>Member |         |                     |                                |