



CONSENT TO SERVE FORM ELECTIONS and APPOINTMENTS

I _____ RN, agree to submit my name as a candidate for
(Print your name clearly)

_____. If elected / appointed to the position, I consent to serve and fulfill
(Position desired)
the duties of the office to the best of my ability. To be considered for this position I declare that I am an RN and will remain collective bargaining eligible throughout my term of office/appointment and am a member in good standing of an NFN Nursing Labor Organization (NLO).

(SIGNATURE)

(Print name and credentials)

NLO you are a member of _____

(To be used for NFN publications)

Home address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

E-mail: _____ Fax #: _____

NFN/NLO INVOLVEMENT: _____

PERSONAL INFORMATION - Interests, community involvement, honors, awards, volunteerism:

If not elected to position of my choice, I agree to be considered for other appointive positions.

() Yes () No

All Completed "Consent to Serve" forms must be postmarked not later than **60 days prior** to the opening day of the NFA and may be sent via US mail c/o the NFN "**Secretary**" to the NFN at 888 16th Street NW, Suite 800, Washington, DC 20006 or emailed to info@nfn.org.

If "Consent to Serve" form is for the Secretary position, mail completed form c/o the NFN "**Vice-President**" to the NFN at 888 16th Street NW, Suite 800, Washington, DC 20006 or email to info@nfn.org.