

## Alaska Nurses Association PROVIDENCE REGISTERED NURSES

## **2024 Consent to Serve** Providence Registered Nurses – Grievance Officer

I, \_\_\_\_\_\_, consent to serve as an elected leader of the **Providence Registered Nurses Bargaining Unit – AaNA** in the position of **Grievance Officer** for the term January 2025 to January 2027. I will carry out the functions of the office as stated in the Providence Registered Nurses Bargaining Unit Rules and Alaska Nurses Association's Bylaws, Policies and Procedures.

Signed

Date

\_\_\_\_ I certify that my typed name represents my legal signature.

## Please complete and return the Consent to Serve by December 6, 2024

Submit this form to andrea@aknurse.org

Submission may also be completed via mail to: Alaska Nurses Association – Nominating Committee 3701 E. Tudor, Suite 208, Anchorage, AK 99507 Or Fax: (907) 272-0292

# **Biographical Data Form**

### 1. Contact Information

	Name
	Name(Please include degrees and certifications)
	Home Address
	Employer (Please include department & city/town where employer is located)
	Present Employment Position
	Telephone (cell) (home)
	Email
2.	Years of experience as an RN
3.	Past 5 years of Professional Experience in Nursing or Related Positions
Po	sition, Title, Employer, Dates

\_\_\_\_

### 4. AaNA or other Organizational Experience

Please describe your involvement, leadership, and/or volunteering experience with AaNA and/or other organizations. Include level of education here if desired.

#### 5. Statement of Interest

Please provide one paragraph on why you wish to hold this position within AaNA and your goals for the position.