ASSOCIATION OF HEALTH SERVICE ADMINISTRATORS, GHANA
ELECTION OF NATIONAL OFFICERS
NOMINATION FORM

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1. Position applied for (Please tick appropriately)

- ☐ **President**
- ☐ **Vice-President**
- ☐ **General Secretary**
- ☐ **Deputy General Secretary**
- ☐ **Financial Secretary**
- ☐ **Treasurer**
- ☐ **Public Relations Officer**
- ☐ **Welfare Officer**
- ☐ **Two Executive Committee members**

2. Personal Data of Nominee

Name : …………………………………………………………………………………………………...

Grade : …………………………………………………………………………………………………...

Current Station / Facility……………………………………………………………………………….

Region: …………………………………………………………………………………………………...

3. *First (1st) endorsement of nomination : To be completed by member in good standing*

Name :………………………………………………………………………………………………….

Grade : ………………………………………………………………………………………………...

Current Station / Facility : ………………………………………………………………………

Region : ………………………………………………………………………………………………….

Signature: ………………………………………………Date: ………………………………………………...

4. *Second(2nd) endorsement of nomination : To be completed by member in good standing*

Name :………………………………………………………………………………………………...

Grade : ………………………………………………………………………………………………

Current Station / Facility……………………………………………………………………………

Region : ………………………………………………………………………………………………..

Signature: ………………………………………………Date: ……………………………………………….

5. *Signature of Nominee: ……………………………………………… Date: ……………………………………*