SEPONL Call for Nominations

**On behalf of the SEPONL Board, we would like to encourage you to join the 2022 SEPONL Board.**

The available board positions are:

1. **Co-Chair Elect**: three-year term (first year Co-Chair Elect, second year Chair, and third year Immediate Past Chair
2. **Secretary**: two-year term
3. **Treasure Elect:**  two-year term (first year Treasure Elect and second year Treasure)
4. **Members -at-Large:** (4 positions) - one-year term

**All members must be in good standing order with PONL**

**All applications are due by October 29, 2021**

Voting will open to all SEPONL members in early November

Thank you for your interest in becoming a SEPONL Board member. By signing below and submitting this form to SEPONL, you are certifying that all information contained herein is accurate and true to the best of your knowledge. You further acknowledge and give your permission to PONL/ SEPONL to use any information contained herein in its written and electronic communications, including but not limited to the PONL website, for the purpose of providing information about you to voting members of SEPONL to aid in their voting decisions, unless such permission is revoked by written notice to the PONL office.

You further acknowledge that should you be elected by the membership that you will execute the duties of the office to which elected to the best of your ability, and in full accordance with the PONL By-Laws and SEPONL Guidelines.

PONL is a professional nursing organization designated as a 501c (6) organization under the Internal Revenue Service Consolidated Federal Register regulations. As such, PONL is committed to equal opportunity in all aspects of its operations. PONL does not discriminate on the basis of nationality, race, creed, lifestyle, color, gender, sexual orientation, age, disability, or religion.

Thank you for your interest in submitting your application for the SEPONL Board. Select the position you are applying for, attach current CV/resume and a brief 500-word statement on why you would like to be considered

**Please complete the entire application process by October 29, 2021.**

**Email completed form to Sabrina Truglio @** [**Sabrina.Truglio@Pennmedicine.upenn.edu**](mailto:Sabrina.Truglio@Pennmedicine.upenn.edu)

**Member Name:**

**Email:**

**Select desired Leadership Position:**

**\_\_\_\_ Co-Chair Elect**

**\_\_\_\_ Secretary**

**\_\_\_\_ Treasure Elect**

**\_\_\_\_ Member-at-large**

**\_\_\_\_ Attach CV/resume**

**Why are you applying for this position? (500 words)**