



ELECTION TIMES

Philippine Nurses Association of America, Inc. — NOMELEC BULLETIN

First Issue

October 2015

The PNAA Nominations and Elections Committee would like to announce the various leadership positions open for elections for the term 2016-2018. Everyone is encouraged to take part in this important event.

The NOMELEC committee must receive your completed application form electronically by midnight (your time zone) of March 8, 2016. The necessary Candidate's Profile and Nomination Forms are included in the succeeding pages.

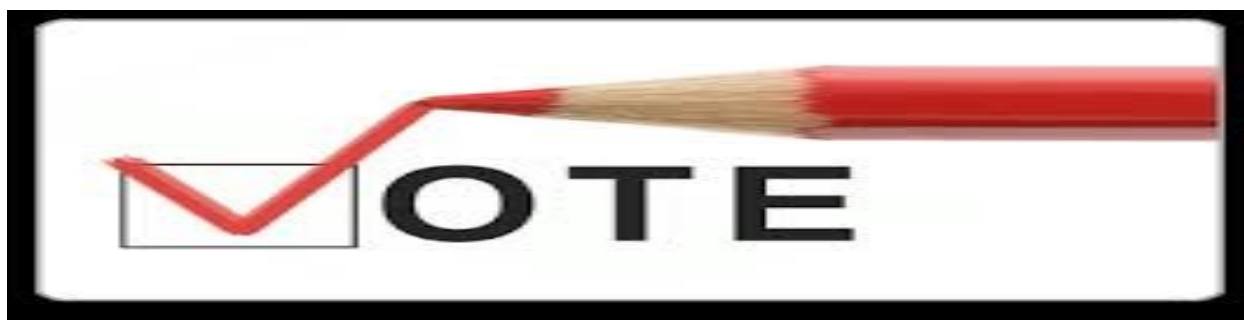
Positions open for Elections:

- **President-Elect** (Serving as President in 2018-2020)
- **Regional Vice President** : Four (4) for the geographic areas of:
 - ⇒ *Western*
 - ⇒ *Eastern*
 - ⇒ *North Central*
 - ⇒ *South Central*
- **Board Members** : Five (5) positions
- **Secretary**
- **Treasurer**
- **Auditor**

"Election of Officers to lead PNAA as members of the Executive Board for the term 2016-2018 is a vital commitment to our national organization."

- Victoria Navarro
PNAA NOMELEC
Chairperson

NOMELEC will be utilizing Electronic voting using the Electoral System of one (1) vote for every ten (10) chapter members.





PHILIPPINE NURSES ASSOCIATION OF AMERICA, INC.

Nominations and Elections Committee

A **signed** completed CANDIDATE'S PROFILE AND NOMINATION FORM (PNAA EF-2010) is required to complete the nomination. The PNAA-EF 2010 can be signed and submitted electronically in PDF format to Victoria B. Navarro at vnavarr1@jhmi.edu. This form must also include the signature (may be electronic) of your respective chapter president as validation that you are a member in good standing of your chapter. One headshot photo (jpeg; minimum of 2 MB) must accompany your submission packet.

The PNAA-EF 2010 form also contains a space for the candidate to describe his/her position on issues, vision, and intent to serve. Please take note of term limits (two consecutive years in one position) before filing your candidacy to a particular position. Candidates for the office of the President-Elect and Regional Vice-President require a position in the national executive board, a national committee chairmanship, or a president of a chapter during the term 2014-2016 to be eligible to run for this office.

Note:

- Signatures may be wet signatures, scan completed forms and submit electronically, or
- Copy and paste images of signatures on completed forms and submit electronically

Contact person: Victoria B. Navarro

Mobile phone: (410) 245-9372

Email: vnavarr1@jhmi.edu

An acknowledgement e-mail letter will be sent, upon receipt of your completed application and required documents.

Deadlines will be strictly enforced. Please note that election information and timelines are published in the PNAA website, www.mypnaa.org

The NOMELEC committee must receive your completed documents electronically by **midnight (your time zone) of March 8, 2016.**



PHILIPPINE NURSES ASSOCIATION OF AMERICA, INC.
Nominations and Elections Committee

CANDIDATE'S PROFILE AND NOMINATION FORM (PNA EF-2010)
ALL POSITIONS ARE FOR TWO YEAR TERM

Name:			
	Last	First	MI
PNA Chapter:			
Address:			
	Street address	City	State Zip
Home tel:		Preferred e-mail address:	
Employment Profile			
Current RN Licensure	State of licensure:	Active <input type="checkbox"/>	Retired <input type="checkbox"/>
Current position:		Years in this position:	
Employer:		Work Phone:	E- Mail:
Education Profile			
School or College of Nursing /Higher Degree		Year Graduated	Degree Granted
Indicate PNAA Position for Election 2016			
<input type="checkbox"/> President-Elect			
Regional Vice President			
<input type="checkbox"/> Western			
<input type="checkbox"/> Eastern			
<input type="checkbox"/> North Central			
<input type="checkbox"/> South Central			
<input type="checkbox"/> Secretary			
<input type="checkbox"/> Treasurer			
<input type="checkbox"/> Auditor			
<input type="checkbox"/> Board Member			

I. PNAA Profile/PNA Chapter Profile (Include local PNA Chapter Positions)			
Year	Position Held	Year	Major Accomplishments

II. SUMMARY OF PROFESSIONAL / WORK HISTORY (Please use additional sheets as appropriate)		
<i>Designation/ Position</i>	<i>Office/ Company/ Organization</i>	<i>Brief Description of Functions and Responsibilities</i>
III. SUMMARY OF ACCOMPLISHMENTS OR CONTRIBUTIONS (Please arrange chronologically and attach supporting documents.)		
IV. AWARDS / CITATIONS / HONORS (Please arrange chronologically, if any, and enclose copies of citations or supporting documents. Use additional sheets as necessary)		
<i>Awards/ Titles/ Honors/ Citations</i>	<i>Conferred by</i>	<i>When Conferred</i>



PHILIPPINE NURSES ASSOCIATION OF AMERICA, INC

Candidate's Statement of Philosophy and Intent

Provide brief position statement/philosophy/goals that would best describe your commitment to serve as an elected officer to lead PNAA. (300 words limit).



PHILIPPINE NURSES ASSOCIATION OF AMERICA, INC

Candidate's Statement of Philosophy and Intent

**I WILL SERVE AND FULFILL THE RESPONSIBILITY OF THE _____ (name of office)
TO WHICH I AM ELECTED.**

Print Name: _____

Signature: _____ **Date:** _____

I am a paid and current member of PNA Chapter: _____

Nominated by (Chapter): _____

Signature of Chapter President: _____

Date: _____



PHILIPPINE NURSES ASSOCIATION OF AMERICA, INC.

Conflict of Interest Disclosure Statement

In accordance with the Standards of Conduct and Conflict of Interest Policy adopted by the Executive Board, it is required for your position with the Philippine Nurses Association of America, Inc. as _____ (name of office) that you complete this disclosure statement. This disclosure statement is confidential and will be available only to the Nominations/Bylaws Committee Chairpersons (for potential candidates for office only) and to the PNAA Executive Board. Statements will be kept on file for five years by the Philippine Nurses Association of America, Inc.

I, _____, hereby declare that I have read and understand the attached PNAA Standards of Conduct and Conflict of Interest Policy. At this time, I do not have any conflict of interest or potential conflict of interest to disclose as delineated in the PNAA Policy and Procedure. I will update this disclosure statement annually or whenever a potential or real conflict arises.

Print Name: _____

Candidate's Signature: _____ Date: _____

I have read and understand the attached Standards of Conduct and Conflict of Interest Policy and hereby disclose the following as conflict of interest or potential conflicts of interest in accordance with the policy: (Use additional sheets if necessary.)

Print Name: _____

Candidate's Signature: _____ Date: _____

Do not write below this line, For Official Use Only

In further review of the contents of this disclosure, the applicant is hereby

_____ Granted to run for national office

_____ Ineligible to run for national office

Signature NOMELEC Chair: _____

Date: _____

This Conflict of Interest form must be submitted electronically together with the rest of the requirements.



VICTORIA NAVARRO
CHAIRMAN



MILA CAPULONG VELASQUEZ
ADVISER



GISELLE ABELLERA
Western Region
Representative



GRETA PARDUE
South Central Region
Representative



BONG DAYON
North Central Region
Representative



MAJUVY SULSE
Easter Region
Representative



EVELYN SUGIYAMA
MEMBER



ROSE ESTRADA
MEMBER



SOFY BOYLE
MEMBER



JENNIFER DIZON
MEMBER



FELY PERLAS
MEMBER



AMY TIZON
MEMBER



PNA OF AMERICA

Nominations and Elections Committee 2014 - 2016