

IPAC Ottawa Region-Nomination Form

Please indicate your interest in volunteering or nominating someone for the following positions. If nominating, provide name (please advise nominee). **Please use 1 form per position.** Elections will be held during the fall meeting. If you are presently an IPAC OR representative for one of the positions, please confirm your continued interest in the position. Send the completed form to ipacottawaregion@gmail.com.

Name of Member Submitting Form:			
Email:			
Name of Nominee:			
x	Nomination/Volunteering for the Year of:	Volunteer	Nominate
Executive Committee			
	President-Elect		
	Secretary (1 year)		
	Treasurer (2 year)		
	Membership Coordinator (1 year)		
	Education Coordinator (1 year)		
	Conference Coordinator (1 year)		
	Webmaster/Social Media Coordinator (1 year)		
IPAC Canada Interest Group			
	Cardiac Care		
	Community Health		
	Dialysis		
	Environmental Hygiene		
	Healthcare Facility Design and Construction		
	Long Term Care		
	Mental Health		
	Oncology		
	Pediatrics and Neonatal		
	Pre-hospital		
	Reprocessing		
	Surveillance/Applied Epidemiology		
Standing Committees			
	Education		
	Standards and Guidelines		
	Membership		