The ALHFAM Nominating Committee encourages members to recommend individuals for elected and appointed positions, and accepts self-nominations, too. All nominees must be individual ALHFAM members in good standing.

Please complete a separate form for each person you nominate.

RETURN via email to the Nominating Committee Chair, Deb Arenz, deb.arenz@nebraska.gov.

SUGGESTED NOMINEE: _____________________________________________
TITLE: _______________________________________________________________________
AFFILIATION: ___________________________________________________________________
ADDRESS: ______________________________________________________________________
(Street)
(City) __________________________ (State/Province/County) __________ (Zip/Postal Code)
Telephone: (____) _____________ Fax: (____) _____________________
Email: __________________________ Home/Cell Telephone: (____) __________

ALHFAM Position for which the individual is a suggested Nominee: (please check one)
___Vice President ___ Secretary/Treasurer ___Board ___ Nominating Committee

Is this person an ALHFAM individual member in good standing? _____Yes _____No
(as required by the ALHFAM Bylaws)

Why I believe this person should be selected as a Nominee (Use additional pages if necessary):

Individual submitting this suggested nominee: _______________________________
Affiliation: __________________________________________________________________
Telephone: (____) _____________ Email: __________________________________________________________________
Submissions of Recommendation for Nomination are welcome at any time.