

**IPAC Board Nominee Form**

*INSTRUCTIONS: Complete the form below as soon as possible, and return it to the Nominations Committee Chair and current IPAC President. The information you provide will be included with the ballot as part of the election process, and IPAC reserves the right to edit any content.*

|  |  |
| --- | --- |
| **Year(s) & Position** |  |
| **Nominee Name**  *[use the name by which you are known professionally, including any earned certifications or education credentials]* |  |
| **Job Title** |  |
| **Employer** |  |
| **Employer’s City, State** |  |
| **Brief Biography**  *[include work, education, certifications, IPAC roles you have held, IPAC Conferences attended, and other career/professional experiences]* |  |
| **Position Statement**  *[in 250 words or less tell IPAC Members what your focus will be in this IPAC role]* |  |