

State Elected Positions Nomination Form Virginia Physical Therapy Association

Instructions: Submit one form for each person recommended. You may recommend an individual (or yourself) for more than one position. This form must be received by **July 1st** for elections at the October annual meeting. Please return this form by mail, fax, or email to: **Virginia Physical Therapy Association* 1111 N. Fairfax St, Alexandria, VA 22314* Fax 703-706-8575*** Email juliarice@apta.org.

Member Recommended (please provide contact information of possible):

Name: _____ District: _____

Address _____ City: _____ Zip: _____

Telephone: _____ Email : _____

Recommendation from:

Individual member Official recommendation by District: _____

Recommended for the position(s) of:

Even-numbered years:

- Vice-President
- Treasurer
- Nominating Committee- Northern district
- Nominating Committee- Central district
- Nominating Committee- Tidewater district

Odd-numbered years:

- President-Elect
- Chief Delegate
- Secretary
- Nominating Committee- Blue Ridge district
- Nominating Committee- Mountain district
- Nominating Committee- Valley district

Annually:

- Delegate
- Delegate-Elect
- PTA Caucus Representative
- PTA Caucus Representative Alternate

Person completing Nomination Form (must be VPTA member):

Name: _____ APTA Membership #: _____ District: _____

Please identify any qualities listed that you believe the nominee exemplifies:

- | | | |
|--|--|--|
| <input type="checkbox"/> Leadership experience | <input type="checkbox"/> Consensus builder | <input type="checkbox"/> Visionary |
| <input type="checkbox"/> Articulate | <input type="checkbox"/> Technology expertise | <input type="checkbox"/> Organized |
| <input type="checkbox"/> Persuasive | <input type="checkbox"/> Parliamentary knowledge | <input type="checkbox"/> Creative |
| <input type="checkbox"/> Responsible | <input type="checkbox"/> Good at networking | <input type="checkbox"/> Financial expertise |

Comment below about the nominee's strengths and abilities (use back of form if needed):

Thank you for your participation. The VPTA Nominating Committee will solicit this nominated individual for his/her consent to serve.