## **CONSENT TO SERVE**

## WSNA at Ocean Beach Hospital

## **Local Unit Officer Election 2022-2025**

Name:	
Unit:	
Shift:	
FTE:	
Mobile/Home Phone:	
Personal Email:	
I agree to serve as a Local Unit Officer Position for	the position(s):
□ Chairperson	
☐ Vice Chair	
☐ Secretary/Treasurer	
☐ Grievance Officer	
I understand my responsibilities and commitments th	nat I will attend Executive Committee
Meetings, the joint labor-management Conference C	,
my role in the office for which I am nominating mysel	f.
Signature:	
Date:	
Return forms must be postmarked by April 11, 2023	)

Questions? Please contact WSNA Nurse Representative Mara Kieval at mkieval@wsna.org or 206-575-7979, Ext. 3051

