

CONSENT TO SERVE

WSNA/ PeaceHealth St. Joseph Medical Center - Bellingham

Local Unit Officer Election 2019-2022

I agree to serve as _____ Local Unit Officer Position

Unit _____ Shift _____ FTE _____

Name: _____

Mobile/Home Phone: _____

Personal Email: _____

I understand my responsibilities and commitments that I will attend Executive Committee Meetings, the joint labor-management Conference Committee, and any other meetings, and fulfill my role in the office for which I am nominating myself.

Signature: _____ Date: _____

Return this form to any current local unit officer via fax by September 30, 2019.

Fax to 206-575-1908

For email or U.S. mail return this form by September 25, 2019.

Sue Dunlap

Sue Dunlap, MSN, RN, COS-C
Nurse Representative

Washington State Nurses Association

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Questions? Please contact WSNA Nurse Representative Sue Dunlap at sdunlap@wsna.org or by phone 206-575-7979, Ext. 3005.