



Medical Imaging Nurses Association  
ANF (Victorian Branch)  
Special Interest Group  
NOMINATION FORM FOR OFFICE BEARERS  
2011/2012

**Nominees must be current full financial members of MINA Victoria**

**President**

I hereby nominate \_\_\_\_\_ for the position.

Moved \_\_\_\_\_ Seconded \_\_\_\_\_

I agree to accept the nomination \_\_\_\_\_

**Vice President**

I hereby nominate \_\_\_\_\_ for the position.

Moved \_\_\_\_\_ Seconded \_\_\_\_\_

I agree to accept the nomination \_\_\_\_\_

**Secretary**

I hereby nominate \_\_\_\_\_ for the position.

Moved \_\_\_\_\_ Seconded \_\_\_\_\_

I agree to accept the nomination \_\_\_\_\_

**Treasurer**

I hereby nominate \_\_\_\_\_ for the position.

Moved \_\_\_\_\_ Seconded \_\_\_\_\_

I agree to accept the nomination \_\_\_\_\_

**Newsletter Secretary**

I hereby nominate \_\_\_\_\_ for the position.

Moved \_\_\_\_\_ Seconded \_\_\_\_\_

I agree to accept the nomination \_\_\_\_\_

**Committee Member**

I hereby nominate \_\_\_\_\_ for the position.

Moved \_\_\_\_\_ Seconded \_\_\_\_\_

I agree to accept the nomination \_\_\_\_\_

**Please forward completed forms to:**

MINA Vic ANF SIG  
AGM Nomination Form  
Bo 12600 A'Beckett Street PO  
Melbourne Vic 8006

MINA VIC ABN: 55 538 598 388