**APPLICATION for Georgia Association of Nursing Students STATE OFFICE:**

The application for state office consists of four (4) documents, an electronic photo, proof of program enrollment, and a short biographical statement.

1. The documents required are:

(1) Certification of Good Academic Standing

(2) A Statement of Experience and Intent for GANS Office,

(3) A Candidate Information sheet, and

(4) Dean/Advisor Recommendation Form

1. Applicants must submit an electronic photo by email.
2. Applicants must provide proof of enrollment in stated program (e.g. Student ID)
3. Applicants must also submit a short biographical paragraph (200 words) outlining their experience, qualifications, and reasons they are running for office (platform) for inclusion in the Delegate Booklet. This must be submitted by email.

Applications will be accepted by email only. In order to apply for pre-slating by the NEC, please submit this application in its entirety**.**

 **Madison Davis**

**Email:** neceast@ganursingstudents.com

If you do not submit your application for pre-slating, you may still be nominated for office from the floor of the House of Delegates during convention. However, you will still be required to complete and submit the entire application **prior** to nomination.

Your entire application will be available for review by all delegates at a designated location throughout the elections process at convention.

Prior to submitting an application for state office, please review the Chapter Resource Booklet section of Running for state office. Please be sure to take note of the description of duties of each office, as well as the suggested questions for candidates for office. You will then choose the top three positions that you feel best fits you and rank them in order of priority on the application prior to submission to the NEC. If you choose to run for office, the questions listed on these pages are examples of the kinds of questions you may be asked by delegates during the Candidates’ Forum at convention.



This is to certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is an eligible candidate for the Georgia Association of Nursing Students (GANS) Executive Board of Directors. This candidate is currently enrolled and in good standing at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(School Name*)

And meets the qualifications to serve in a state office (not yet specified).

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Candidate Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Dean/Advisor Date**

|  |
| --- |
| To be filled out by the **NEC only:**Candidate is slated for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date placed on slate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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Name:

Intended Office: To slate the best candidates possible, the NEC is asking for your top **three** preferences for office. After careful review the NEC will slate according to qualifications of the applicants. Candidates must know description of duties for three choices of office.

\_\_\_President \_\_\_PR Director \_\_\_East District Director

\_\_\_1st Vice President \_\_\_EKG Director \_\_\_West District Director

 2nd Vice President \_\_\_Community Service \_\_\_NEC North

\_\_\_Secretary \_\_\_BTN Director \_\_\_NEC South

\_\_\_Treasurer \_\_\_North District Director \_\_\_NEC East

\_\_\_Legislative Director \_\_\_South District Director \_\_\_NEC West

\_\_\_Alternate Board Member Assistant to the District Directors

Answer the following questions on a separate page:

* Please give a short statement as to the reasons you are running for a state office.
* If elected, what goals would you strive to accomplish and how do you plan to implement them?
* List any other positions/activities/honors you have held/accomplished that would help you to better serve as a GANS officer.
* Specify what methods you will use to keep lines of communication open between yourself and other board members, chapters, and regions.

**Application Checklist:**

* Certificate of Good Academic Standing
* Statement of Experience and Intent with additional responses on a separate page
* Candidate Information Sheet
* Dean/Advisor Recommendation Form
* Proof of Program Enrollment
* Photograph and Bio to be used in the Convention Delegate Booklet (send by email).

**To be considered for pre-slating, applications must be submitted by October 1,** **at midnight**



**Candidate Information Sheet**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NSNA membership #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Date of Graduation: \_\_\_\_\_\_\_\_\_\_

School of Nursing:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Dean/Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If elected, I agree to serve GANS to the best of my ability and I am aware of the time and effort that is demanded by the responsibilities outlined in the bylaws for the office, which I am being nominated. In addition, I agree that if I voluntarily resign or become an ineligible officer according to the GANS bylaws, ***I will reimburse the GANS for any monies paid on my behalf, i.e. travel to national conventions*.** To the best of my knowledge, all statements made on this application are true. By signing below, I acknowledge that if I am found to have falsified any information on the application, or to have misrepresented myself in order to be elected, my application will be considered invalid. I have reviewed and agree to abide by the campaign guidelines as stated in the Chapter Resource Booklet. I also understand that any violations may lead to action by GANS. I will also as a candidate conduct my campaign with honesty, integrity, and in an ethical manner while being a professional at all times.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Chapter President Date**

**Please return all forms by October 1, at midnight.**





Dear Dean/Advisor:

This letter is to inform you that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_has decided to run for a position, to be determined, on the Executive Board of the Georgia Association of Nursing Students. As you have a direct working relationship with this student, we would appreciate your valued opinion of the situation.

The GANS Executive Board would like to take this time to thank you for your kind cooperation. We recognize that without your leadership and promise to support students in GANS offices, we would not be able to experience the personal and professional growth that we enjoy with your dedication. Thanks for your time and commitment to our organization and our profession.

Do you feel that this student is capable of carrying out the responsibilities of the office without adversely affecting his/her clinical and academic performance?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list the reasons why you feel this student is qualified to serve this office.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*It is the considered opinion of the faculty that this student’s record of performance is satisfactory and the student will be able to devote the time and effort necessary to fulfill the duties of this office. If elected, the student’s faculty and I will assist by supporting and encouraging her or him in the GANS office.*

Printed name of Dean/Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Dean/Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_

**To be considered for pre-slating, this and all forms must be submitted.**