



LEADERSHIP COMMITMENT FORM

All participating leaders must complete this form to serve on a committee within the Missouri Nurses Association (MONA). Candidates must be a current MONA member in good standing to serve (any other specific requirements will be listed in the committee description or requested upon receipt of your commitment form). Submission of this form indicates that you understand the duties and responsibilities of the committee for which you are submitting your name. If selected, you agree to fulfill the duties to the best of your ability.

I agree to submit my name as a candidate for the office of: (please check one):

- Advanced Practice Registered Nurses Special Interest Group (APRN-SIG) Advocacy Bylaws Finance
 Missouri Nurse Editorial Advisory Board (MoNEAB) MONA PAC Practice

Name: _____ Credentials: _____

Street: _____

City: _____ State: _____ Zip: _____

E-Mail: _____

QUALIFICATIONS

Please explain why you are qualified to lead in this position (education, employment, organizational involvement/positions, expertise/specialty, etc.)

By submitting this form, I am committing to:

- Provide leadership in line with MONAs Vision and Mission;
- Be accountable to MONA members – communicate honestly and transparently; and,
- Fulfill the duties of the position and participate when requested.

Signature: _____ Date: _____

- By checking this box, I am providing my electronic signature to confirm that the information provided above is accurate.
(In addition to checking this box, please print name in the signature line and date above.)

RETURN COMPLETED FORM TO
Missouri Nurses Association, 3340 American Ave., Suite F, Jefferson City, MO 65109
Fax (573) 636-9576 or Email info@missourinurses.org