



**SEIU-UHW NOMINATION FORM**  
**Hospital Division**

I, \_\_\_\_\_, am nominating myself for the following elected leadership position:

**Executive Board Position**

\_\_\_\_\_ (Print the Name of Your Hospital)

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**Please Print:**

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Email: \_\_\_\_\_ Hospital Employer: \_\_\_\_\_

**Please print exactly how you would like your name to appear on the ballot. Names will appear on the ballot in alphabetical order:**

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

Hospital: \_\_\_\_\_

Slate Name (Optional): \_\_\_\_\_

Nominee Signature: \_\_\_\_\_

**ELIGIBILITY**

No member shall be a candidate for more than one office. No member may run for a division or facility outside of the one in which they work. A member shall be eligible to be nominated if he/she has been a member of SEIU-UHW in continuous good standing for at least six months as of February 29, 2012. Members in good standing who are staff of the Local Union are not eligible to run for or serve in any elected positions with the exception of union-wide positions.

**This nomination form and the nominee's completed petitions must be mailed to: SEIU-UHW Elections Committee, c/o PO Box 23323; Oakland, CA 94623 and must arrive no later than March 21, 2012, by 5 PM.**