

Nomination Form
AMA Women Physicians Congress Governing Council
Young Physician Section (YPS) Representative

Deadline: Receipt by **February 15, 2008**
*Must provide, electronically, this form, statement of interest (250 words),
summary version of your CV, and a photo to AMA-YPS.*

Name of Nominee:

Contact Information:

Address:

Phone:

Fax:

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E-mail address:

Medical Specialty:

AMA Member: Yes No

Other AMA positions held presently or in the past:

Endorsements from organizations (encouraged but not required):

Name of Organization:

Contact Title:

Please attach letters separately. Thank you.

Submitted by: _____ Date: _____

Statement of Interest

Guided by the WPC Governing Council, the WPC is dedicated to addressing the issues and concerns of women physicians as outlined in its goals and objectives. Please describe your interest in, experience with, and qualifications for this leadership position in the AMA WPC. What particular strengths and expertise would you bring to the WPC? *(Please limit your response to 250 words. Note: your response will be published "as is" in the election mailing and will be your only candidate statement.)*

Please complete and return with photo and CV to:
yps@ama-assn.org
American Medical Association Young Physicians Section
515 N. State Street, Chicago, IL 60610
Telephone: (312) 464-4751 Fax: (312) 464-5845