

Association of Black Health-system Pharmacists

Application of Elective Offices

Elected Office Being Considered: *Please Check One*

- | | |
|--|------------------------------------|
| <input type="checkbox"/> President-elect | <input type="checkbox"/> Secretary |
| <input type="checkbox"/> Board of Director | <input type="checkbox"/> Treasurer |

Committee on Nominations

Name:

Address:

Home:

Business:

Telephone:

Home:

Business:

FAX:

Beeper:

Email:

I have read and understand the responsibilities and commitments of the office I seek and if elected, I agree to fulfill these obligations to the best of my ability and support the bylaws of the ABHP.

Signature

Date

General Instructions: Please complete all sections which apply in a concise manner, listing all entries in reverse chronology (most recent first). Remember that your responses to this survey tool will be utilized by the Nominations Committee in the selection of the final slate of nominees for elected ABHP office.

Employment History/Academic Appointments (in past 10 years)

Please describe current employment position and responsibilities:

Education and Training (list degree or certificate and granting institution only):

Employment/Academic Committee Involvement:

ABHP Activities to Date:

Other Professional/Academic Activities: (State, local, national, etc.)

Additional Information:

Honors, Awards, Organizational Memberships (e.g., American Heart Association, etc.:

Community Service Activities:

Publications/Presentations/Research: (list references)

To gain valuable insight into each candidate's qualifications, please provide concise responses to the following questions:

1. **(a): What issues have you identified as being most critical to the future practice of pharmacy (and how have you addressed these issues in your own practice setting?)**

1. **(b): What issues have you identified as being most critical to the ABHP membership?**

2. **Cite examples of the significant programmatic contributions you have made through other organizations? through your involvement to date in ABHP?**

3. Briefly describe in the space provided what qualifies you for this nomination and what specific qualities do you cite? (Note: the intent of this question is to obtain an overall synopsis of why you would be a good candidate for the elected office you are seeking)