

Leadership Opportunities 2009

It is never too late to consider involvement in your state society. Giving back to your community is a long-standing professional tradition. Involvement with OSPA requires little from you other than a few hours each quarter, and your ideas for improving healthcare for your patients and those throughout the state. Below is a brief summary of the upcoming openings and description of involvement. If you have ever wondered how your ability to practice medicine is decided, please volunteer a little of your time and learn how your ideas can change healthcare in Oregon.

President

In the 2008 election process, there were no candidates or write ins for President-Elect. Due to this vacancy, the President position will be included in the 2009 elections.

President-Elect: (One-year term)

A three year commitment is involved, with the first year being spent working closely with the other members of the Executive Committee (comprised of President, Past-president and President-Elect) which facilitates a smooth transition to the more visible duties of the second year presiding over the Society. The third year is spent providing assistance to the President and President-Elect. [At least three-fourths of all official meetings must be attended.]

AAPA House of Delegates: (HOD) (two-year term)

At any given time there are three delegates. One of these is designated Chief by the delegates and the Board of Directors. Delegates represent our state chapter at the AAPA House of Delegates meeting at the national AAPA conference. As voting OSPA officials, HOD representatives are required to attend OSPA Board meetings to help establish a quorum and to ensure they are familiar with state issues.

2009 Election Nomination Form Instructions (form on reverse side)

- 1) You must identify yourself on the line provided. Only OSPA Fellow Members are eligible to nominate themselves or others.
- 2) Although strongly suggested, you do not have to contact the nominee to submit their name. The identity of the nominators may be kept confidential if specified below.
- 3) All nominees must be both AAPA and OSPA members.
- 4) Once nominated, all individuals will be contacted by the OSPA Elections Committee to confirm qualifications, willingness to run and commitment to fulfilling the requirements of the office.

2009 ELECTION NOMINATION FORM

Nominator's name: _____ Phone: _____

Self-nomination for which office?: _____

If nominating others, do you wish to remain anonymous? YES NO

NOMINEE #1

Name: _____ Home Phone: _____ Work Phone: _____

Address: _____ City&Zip: _____

Nominated for: _____ Nominee aware of nomination?: YES NO

NOMINEE #2

Name: _____ Home Phone: _____ Work Phone: _____

Address: _____ City&Zip: _____

Nominated for: _____ Nominee aware of nomination?: YES NO

NOMINEE #3

Name: _____ Home Phone: _____ Work Phone: _____

Address: _____ City&Zip: _____

Nominated for: _____ Nominee aware of nomination?: YES NO

Include extra sheets with similar information for additional names.

When complete, return to: OSPA, PO Box 2794, Hillsboro OR 97123 or via email at
ospa@oregonpa.org

The forms must be received in the OSPA office by May 27, 2009 for consideration in this
election.