



American Medical Women's Association
The Vision and Voice of Women in Medicine since 1915

Application to AMWA Board of Directors

Name and designations: _____

Phone: _____ Email: _____

AMWA Membership Status: Active Inactive

Specialty: _____

Place of Employment: _____

Title: _____

Professional Affiliations: _____

Do you sit on: the board of other organizations, expert panels and professional committees, governmental entities (please include relevant history too)? Yes____ No____

If so, which ones? _____

Graduate School: _____

Residency: _____

Fellowships: _____

Honors and awards: _____

What is your current level of involvement with AMWA? _____

Please select your preferred position: (check all that apply)
 President Elect Secretary Board Member at Large

Submission Information

In addition to this form, please submit a **statement of interest** and your **CV** to complete your application.

How to submit: Submissions are due by **August 31, 2010** for consideration. Please submit your full application to Sarah Hagy, Interim Executive Director.

Email: shagy@fernley.com

Fax: 215-564-2175

Mail: 100 N. 20th Street, 4th Floor Philadelphia, PA 19103

Nominees will be notified about their application by July 23, 2010