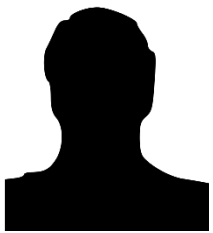




***Surgical Outcomes Club  
Board of Directors Nomination Form***

Nominee (including degrees):	
Position Title:	
Institution:	
Mailing Address:	
Phone:	
Email:	
Nominated by: (self nomination accepted)	
*Position Nominated for: (Resident/Fellow vs. At-large Director)	At-large Director
Nominator Phone Number:	
Nominator Email Address:	

**Please provide below, a one paragraph biosketch (maximum 250 words) describing the nominee's background and qualifications for serving in this role. Please also include a photograph of the nominee. The photograph and biosketch will supplement the ballot shared with membership at Annual Meeting.**

	
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Email nomination form as attachment to: [agay@umich.edu](mailto:agay@umich.edu) by **Friday, September 4, 2020.**