




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)	
Nominator Phone Number:	
Nominator Email Address:	

**Nominees should be an active member in SOC and have attended at least one Annual Meeting.*

***Requirements: the resident term must coincide with a two-year research fellowship (or other non-clinical roles)*

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 the Annual Meeting.



Email nomination form as attachment to: agay@umich.edu by *Friday, September 3, 2021*