



Application for VANS Office Certification of Good Academic Standing

**This is to certify that the person listed is a candidate for a
VANS office to be determined.**

Name of Applicant

**This candidate is currently enrolled and a student in good
standing at Valdosta State University College of Nursing and
meets the qualifications for an office.**

Please select the office for which you're applying. Candidates must
know description of duties for three choices of office.

- President
- Vice President
- Treasurer
- Secretary
- Website/Newsletter Director

Candidate

Academic Advisor for Candidate

VANS President

VANS Academic Advisor

Date



Candidate Information Sheet

Name _____
Address _____
Email address _____
Phone # _____
NSNA membership # _____
Anticipated Date of Graduation _____
Name of Dean/Advisor _____

If elected, I agree to serve VANS to the best of my ability and I am aware of the time and effort that is demanded by the responsibilities outlined in the bylaws for the office, which I am being nominated. In addition, I agree that if I voluntarily resign or become an ineligible officer according to the VANS bylaws, *I will reimburse the VANS for any monies paid on my behalf, i.e. travel to national conventions.* To the best of my knowledge, all statements made on this application are true. I have reviewed and agree to abide by the campaign guidelines as stated in the Chapter Resource Booklet. I also understand that any violations may lead to action by VANS. I will also as a candidate conduct my campaign with honesty, integrity, and in an ethical manner while being a professional at all times.

Signature of Applicant: _____ Date: _____

Signature of Campaign Manager: _____ Date: _____

Please return this and all to:

Academic Advisor, Valdosta Association of Nursing Students
C/O Valdosta State University, College of Nursing
1300 N. Patterson Street
Valdosta, Georgia 31698