



North Carolina Society of Radiologic Technologists, Inc.
AN AFFILIATE OF THE ASRT

Directions:

Complete the sections of this form, attach required documents, make a copy to keep for your personal file and mail or email to: Nomination Committee Chair • tmgoins@randolph.edu 456 Creekwood Dr. Lexington NC 27292

Personal Profile

NCSRT Membership number:

I prefer to receive correspondence at Home Work

Name:

Street Address:

City: State: Zip Code:

Home Phone: Home e-mail:

Professional Profile

Medical Credentials (exactly as you wish them to appear on the election ballot- Example: R.T. (R))

Academic Credentials (exactly as you wish them to appear on the election ballot- Example: B.S., M.Ed.)

Job Title:

Department:

Employer name:

Employer Street Address:

City:

State:

Zip Code:

Work phone:

Work Fax:

Work e-mail:

Disciplines or Specialties

attach another page with required information if more space is needed

Please list disciplines or specialties in which you are certified and provide certification information: Example: Radiology, Mammography, MRI.

Supporting Documents

attach another page with required information if more space is needed

Ensure that you attach copies of the following documents to this form

Copy of current registry card

Recent Photo – head shots only

Community and/or Civic Involvement

attach another page with required information if more space is needed

List positions/offices held committee involvement and/or other service with NCSRT, ASRT, PTA, other Societies, etc. List any accomplishments that you would like the members to know about when considering you for office.

Candidate Position Statement

In 50 words or less, explain why you are a good candidate for the office. This will be published in an issue of *Tarheel Technology Highlights* and NCSRT Inc. web site. Candidates are responsible for ensuring spelling and grammar accuracy. Position statements should be typed and attached to this form along with supporting documentation. **All documents should be forwarded to Nomination Chairman as soon as possible.**

For Office use only:

Date Received:

Eligible to run:

Verified by:

Tami Goins BSRT (R)(CT)
NCSRT Inc. Nomination Chair
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