

Canadian Association of Pharmacy Students and Interns (CAPSI)
University of British Columbia
2405 Wesbrook Mall
Vancouver, British Columbia, V6T 1Z3
www.capsiubc.com

CAPSI UBC COUNCIL ELECTIONS

NOMINATION FORM

We, the undersigned, nominate Council for the 2017-2019.	for the following position on the CAPSI UBC Executive
☐ Junior Representative	
☐ Vice-Treasurer	
☐ Secretary	
☐ Sponsorship Coordinator	
☐ Community Education Coordinator	r
☐ IPSF Liaison	
☐ IT Officer	
☐ First Year Representative	
☐ Second Year Representative	
☐ Third Year Representative	
☐ Fourth Year Representative	
NOMINATOR INFORMATION #	/ 1
First Name:	Last Name:
Signature:	Year of Study:
NOMINATOR INFORMATION #	±2
First Name:	Last Name:
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Signature:	Year of Study: