

Nomination form for election to the FPM board

This form can be completed electronically, requiring provision of a digital signature, or can be printed and completed by hand.

Fellows to complete:

We wish to nominate _____, a fellow of the Faculty of Pain Medicine, as a candidate for election to the Board of the Faculty of Pain Medicine, Australian and New Zealand College of Anaesthetists.

Name (please print) _____ FFPMANZCA

Signature _____

Name (please print) _____ FFPMANZCA

Signature _____

Nominee to complete:

I _____ (please print) consent to act, if elected, and abide by ANZCA Regulation 41 Conduct of Elections.

Signed _____ FFPMANZCA

Please complete the following declaration as part of your nomination

Are you aware of: Yes No

1. Any criminal charge or proceeding in relation to a serious offence as defined in the constitution:

If Yes, please provide details:

2. Any claim or complaint against you relating to your practice (other than a frivolous claim or complaint):

If Yes, please provide details:

3. Any reprimand, adverse finding or caution issued by an authority or other statutory body which investigates health care complaints during the five years prior to the date of nomination:

If Yes, please provide details:

4. Any claim or notification in relation to your practice (other than a frivolous claim or notification) made to an authority during the five years prior to the date of nomination:

If Yes, please provide details:

Signed _____ FPMANZCA

Please submit all completed nominations to the following:

fpm@anzca.edu.au

Leone English, Executive Director, FPM
Faculty of Pain Medicine,
ANZCA House
PO Box 6095, Melbourne, Vic 3004

**All completed nominations must be received by
2pm AEDT, Wednesday 8 November 2023**

Note: Under Regulation 41, the council may publish any information provided pursuant to this declaration in connection with the conduct of or in any materials relating to any election in which the candidate participates.
