



Ohio Chapter, American College of Emergency Physicians
2012-2013 LEADERSHIP DEVELOPMENT ACADEMY
NOMINATION/APPLICATION FORM

Instructions:

Your application will be reviewed by the Ohio ACEP Membership and Leadership Development Committee. Please include your CV and any supplementary material that you would like the Committee to review concerning this nomination. You may also download a copy of the Nomination/Application Form at www.ohacep.org/leadership.

Applicant Profile:

Name of Nominee:

Hospital/Physician Group Affiliation:

Number of years as a member in ACEP/EMRA:

Residential Mailing Address:

Home Phone:

Cell Phone:

Office Phone:

Preferred email:

Birthday (Day/Month):

Applicant Questions:

- 1. Please list any state or national activities in which you have participated (leadership positions, committee or task force involvement, etc.)
2. Please list any leadership positions in organized medicine that you have held
3. Please describe how your participation in the Leadership Development Academy might benefit your state, physician group and/or hospital
4. Please describe your interest in the Leadership Development Academy, including why you should be selected by the Committee to participate

Please Rank Your Top 3 Areas of Interest:

- Understanding my medical society
Advocacy at the state level
Advocacy at the national level
Public speaking or media relations skills
Leadership opportunities at the state level
Leadership opportunities at the national level
Ohio ACEP Committee membership / specify:
Education
EMS
Government Affairs
Practice Management

Applicant Submission Information:

- YES, if selected, I agree to participate in all designated elements of the program
YES, I have discussed my participation with and have the support of my department director
YES, I have asked my department director to submit a letter of support by mail or e-mail by Feb 8, 2012

Signature of Nominee _____ Date _____

Please return completed nomination form, CV, and supplemental material by February 8, 2012 to:
Laura Tiberi, OHACEP Executive Director
3510 Snouffer Road, Suite 100
Columbus, OH 43235
ltiberi@ohacep.org