AANMS Expression of Interest Form for

**AANMS Representative on ARTnet Executive Committee**

|  |  |
| --- | --- |
| **Applicant Details** | |
| *Title* |  |
| *Given Names* |  |
| *Family Name* |  |
| *Postnominals* |  |

|  |  |
| --- | --- |
| **Preferred Contact Details** | |
| *Phone (work)* |  |
| *Mobile* |  |
| *Email* |  |

Briefly state how your qualifications, knowledge, experience and interest in nuclear medicine research and organisational governance/finance will represent the interests of the AANMS on ARTnet.

*Please attach a copy of your curriculum vitae Attached*

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email completed form to the AANMS at: [gm@aanms.org.au](mailto:gm@aanms.org.au).

**Closing date: c.o.b. Wednesday 30 November 2022**