

Nominations for President of the Scottish Cardiac Society

Name of Nominee:

Address:

e.mail:

Tel:

Signature of Nominee indicating willingness to be considered for position of President:

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Proposed by:

SIGNATURE::

Seconded by:,

SIGNATURE:

Please send completed form to: Miss Helen Elliott
Education and Standards Department
Royal College of Physicians of Edinburgh
9 Queen Street
Edinburgh
EH12 1JQ