

DAORN MEMBER BIOGRAPHY UPDATE

The Nominating Committee collects ballot information for the coming year. Please complete the following form and return it to the Nominating Committee
Chairman/Member by: 2-16-2018. Keep a copy for yourself as a record of your DAORN work.

Name: JULIE MOWER Where Employed: CCI

Joined DAORN (Year): 1982 Hospital Captain: Yes ___ No X
Number of years: N/A

CNOR: Yes X No ___

National Offices Held: N/A

DAORN Chapter Offices Held: ALL OF THEM!

Past DAORN Committees: Indicate if Chairman, Co-Chairman, member and number of Year(s) on each Committee:

MEMBER, FALL WORKSHOP COMMITTEE X 4 YEARS

Current DAORN Committees presently on:

CO-CHAIR, DAORN SPRING WORKSHOP 2018

Past National Committees: GOVERNING COUNCIL CHAIR, AORN SA 2015-2017

Current National Committees: CHAIR, CNS TASK FORCE 2017-2018, GOVERNING COUNCIL CHAIR, CLINICAL NURSE EVALUATOR, SA, 2017-2018

Other AORN chapter (city or out of state) involvement: N/A

Number of Congresses Attended: >10 Number as a delegate: >10

Community Projects: (OR Nurse Day at the Museum, Habitat for Humanity etc: _____)

Mail, email, FAX to: _____

Rev. 3/01

Kathy Doughty
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DAORN

WILLINGNESS TO SERVE FORM

Thank you for taking the time to complete this form. Your volunteer efforts are welcomed and appreciated.

I accept the position of SECRETARY.
I understand the demands of the office I have been nominated for and I am willing and able to complete the full term of that office.

Respectfully signed Julie Power Date Feb. 10, 2018