

The Louisville Area Service Committee of Narcotics Anonymous

Nomination Submission Form

To be turned in at least 15 minutes before the start of the meeting in duplicate: One copy to Area Chair/ASC Executive Subcommittee and one copy to the Policies and Procedures Chair/Committee.

Date: _____

Position Individual is nominated for: _____

Submitted by (Home Group/Subcommittee): _____

Nomination: _____

Have you consulted the individual being nominated?

- Yes No

Does this person meet the position guidelines?

- Yes No

Has this person completed a service resume?

- Yes No