**Nomination Form for Membership of the**

**Sigma Theta Tau International, Honor Society of Nursing**

**(Nurse Leader of Pi Iota Chapter, Hong Kong)**

I wish to recommend to the Eligibility Committee for considering the following nurse leader to be a new member of the society.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of nominee: (Prof./Dr./Mr./Mrs./Ms./Miss) | | |  | | | | | |
| Workplace: | |  | | | | | | |
| Address: | |  | | | | | | |
| Fax: | |  | | | Tel |  | | |
| Email: | |  | | | | | | |
| Nominee’s significant/outstanding contributions to nursing are as follows\*:  (to be continued) | | | | | | | | |
| **Qualification:** | | | | | | | | |
| **Working (Title or Rank):** | | | | | | | | |
| **Significant achievement in nursing scholarship, leadership, or service/ practice:** | | | | | | | | |
| **Proposed by**: | |  | | | | | Signature: |  |
| (in block letters) | |  | | | | | | |
| Year Inducted as STTI Member: | | | |  | | | | |
| Workplace: | |  | | | | | | |
| Fax: | |  | | | Tel: |  | | |
| Email: | |  | | | Date: | |  | |
|  |  | | | | | | | |
| Remarks to member:   * The nominee should demonstrate marked achievements in nursing education, research, service/practice, and/or leadership. * The recommendation can only be made by members of the Society or members of other International Chapters of Honor Society of Nursing.   Remarks to nominee:   * This form must be submitted to PIC by a current STTI members. If you are proposed and recommended by STTI member, please complete the form and send it back to the member for submission. * **The above information will be reviewed by the Eligibility Committee of the Hong Kong Chapter (Pi Iota Chapter) and then be recommended to the headquarters of the Sigma Theta Tau International (STTI) for registration. You may be approached for supporting documents such as CV, academic certificates and professional license certification for practice.** | | | | | | | | |