

**Elected MCG Academic Council Officer
and Subcommittee Member Nomination Form**

Please indicate the **Academic Council Officer** position you would like to run for in the upcoming election. (A brief sketch of duties for each office is attached.)

_____ Vice-Chair Elect of the Academic Council (one year term, will be Vice-Chair the following year)

Please indicate the **Academic Council Subcommittee(s) membership** you would like to run for in the upcoming election. (A brief sketch of duties for each subcommittee is attached.)

_____ MCG Faculty Grievance Subcommittee (three year term)

_____ MCG Faculty Membership, Nominating, & Voting Subcommittee (one year term)

_____ MCG Faculty Statutes Review Subcommittee (four year term)

_____ MCG Faculty Appointment, Development, Promotion, Tenure & Post-Tenure (two year term)

Please indicate your willingness to run in the upcoming election for a seat on the **Medical College of Georgia Research Institute, Inc. Board of Directors**.

_____ MCGRI Board of Directors (three year term)

Name _____

Department

School _____

Office Extension