



Southwestern

Pharmacy Alumni Association Council

Nomination Form

Your Southwestern Pharmacy Alumni Association is looking for volunteers to actively serve on a the Pharmacy Alumni Association (PAA) Council. The Council promotes the interests and welfare of the Southwestern College of Pharmacy and the PAA by providing a direct communications link between the College of Pharmacy and its alumni. All Southwestern Oklahoma State University College of Pharmacy alumni are eligible for council membership. If you would like to nominate yourself, complete the form and submit at your earliest convenience.

Qualifications of PAAC

- Commitment to Southwestern College of Pharmacy and the Pharmacy Alumni Association as well as the profession of pharmacy
- Current member of the Pharmacy Alumni Association
- Southwestern Oklahoma State University College of Pharmacy graduate

Please submit nomination form to:

Southwestern Pharmacy Alumni Association
ATTN: Council
P.O. Box 702
Weatherford, Oklahoma 73096

Email: swpharmacy@swosu.edu
Fax: 580-774-3243
www.southwesternpharmacy.com

**Southwestern Pharmacy Alumni Association Council
Member Nomination Form**

Full Name _____ *Grad Year* _____

Primary Phone # _____ *Secondary Phone #* _____

Primary Email Address _____

Home Address _____

City, State, Zip _____

Work Address _____

City, State, Zip _____

Reasons you want to volunteer to be a PAA Council Member _____

If additional space is needed, please attach information to form when submitting.