

**Application for the Mammary Fold Academic Committee 2017-18**

**1. Demographics:**

Forename

Surname

E-mail address

Mobile number

Current training grade

**2. I wish to stand for the position of:**

✖MFAC Member

**\*3. I confirm that I will be available to attend both the handover of duties at the Mammary Fold pre-ABS meeting, and the official confirmation of appointments at the Annual General Meeting of the Mammary Fold at the ABS conference in Birmingham 2018 (compulsory for new committee members):**

Yes

No

**\*3. I confirm that I will hold membership of ABS during my committee post if elected:**

Yes - already hold

Yes - application

No

**\*4. I am self-nominated for my chosen role but the following members of the Mammary Fold second my nomination and have agreed to be contacted on the following e-mail addresses to confirm my good standing as a member of the Mammary Fold suitable for office on the Committee**

**\*5. We need a statement from you to help Mammary Fold Academic Committee members decide their choice of the candidate for the role, with a word limit of 250 words.**

I believe that I am the ideal candidate for my chosen role because