

NOMINATION FORM

for representatives of GENERAL PRACTITIONERS in respect of



ELECTION OF GPs TO LIVERPOOL CCG
for the period 1 June 2014 to 31 May 2017

Name:.....

Address:.....

Practice Constituency: CENTRAL / MATCHWORKS / NORTH*
GP Status: Partner / Salaried / Sessional (Locum)*
*Please delete as appropriate

I confirm that I am a GP working in a Liverpool practice in the above indicated Constituency (and if I am a sessional/locum GP have been working predominantly within a Liverpool Practice since 1 October 2013) and am prepared to accept office if elected:

Signature of Candidate:

Date:

TO BE COMPLETED BY THE CANDIDATE

Brief summary of experience in general practice, together with details of service on any professional bodies or other relevant authorities to support your candidature.

STATEMENT MUST NOT EXCEED TWO HUNDRED AND FIFTY (250) WORDS (continue on back or separate sheet if necessary)

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TO BE DELIVERED TO: LIVERPOOL LMC, 1b Greenbank Road, Liverpool, L18 1HG

NOT LATER THAN 5.00 pm ON FRIDAY, 25 APRIL 2014