**NOMINATION FORM**

**ITALIAN SOCIETY OF SURGICAL ONCOLOGY YOUNG BOARD (YSICO)**

**I hereby confirm my intention to stand as a nominated candidate for election to (please select one or both options)**

* **YSICO Chair**
* **YSICO Steering Committee**

**1. NAME and reference details:**

**Name:**

**Position:**

**Institution:**

**Address:**

**Telephone:**

**Email:**

**2. ELIGIBILITY:**

**I am an YSICO Member**

**I am within 15 years of graduation from a medical school: Yes / Not**

**My nominating person is:**

**The position / role of the nominating person is:**

**3. AIMS:**

**I would like to become a YSICO Board Member/Chair because:**

**My aims during my term on the YSICO Steering Committee would be:**

**The skills and experience that I would be able to bring to the role are:**