

HAMASCNA TRUSTED SERVANT

NOMINEE FORM

PLEASE PRINT LEGIBLY

Nomination for Position(s): _____

Nominee Name: _____

City: _____

Phone: _____ Clean Date: _____

Do you have an NA Sponsor? _____

Are you currently working NA Steps? _____

Have you ever lost or stolen NA funds? _____

(If yes please explain) _____

Current NA Service Position(s):

Group Level:

1. _____
2. _____
3. _____
4. _____

Area Level:

1. _____
2. _____
3. _____

Regional Level:

1. _____
2. _____

Previous NA Service Positions:

(List only completed terms: give approx start and end dates for each term)

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Service Positions Resigned (Explained)

1. _____
2. _____
3. _____

Nominator 1 _____

Nominator 2 _____