

# MI NURSES Association

## BIOGRAPHY & CONSENT FOR ELECTED OR APPOINTED OFFICE

Name: **Kara Ayotte**

Member: LBU

Personal Email: kara.ayotte1092@gmail.com

Cell Phone: (517) 416-8083

Home Phone:

Work Phone:

Education (post high school; basic preparation through highest degree held)

Degree	Institution (Name, City, State)	Major Area of Study	Year Awarded
BSN	University of Michigan	Nursing	2014

Credentials (RN, CNP, etc.): RN

Employer/Local Bargaining Unit: Michigan Medicine

Shift/Unit: UH OR

Leadership title(s) and responsibilities: Day charge, EBP committee member, Trauma Team Member, New hire preceptor

Relevant MNA experience:  
Delegate since 2018-current

**Elected:** Officers: President, Vice President, Secretary & Treasurer (*attach a viewpoint, 250 words maximum*)  
Board of Directors  
Committees: Impartial and Nominations

**Appointed:** Committees: Bylaws, CE Provider Unit, Diversity, Resolution, Retirement  
Councils: Clinical Nursing Practice, Advocacy, and Education; Legislation and Public Policy; Workplace Health & Safety  
MNA-Political Action Committee (MNA-PAC)

I am interested in being a candidate for the following office(s):

1) Secretary                      2) Board of Directors                      3) district representative                      4)

**CONSENT:** If elected or appointed to office, as a member in good standing, I will serve MNA in the interest of professional nursing and abide by the MNA Bylaws, the MNA House of Delegates and Board policies and actions.

I have no potential conflict of interest

Signature:

Date:

