**Election of Office Bearers/Directors**

Positions available:

*(List all positions up for nomination)*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Add any specific requirements for nominating outlined in the constitution underneath here such as minimum age & member status)*

Position Nominating For: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If elected to the (organisation) Board, I acknowledge that I have read, understood and agree to adhere to the Board Code of Conduct as provided in the election information kit.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Nominated By:** |  |
| **Signed:** |  |
| **Seconded By:** |  |
| **Signed:** |  |
| **Nomination Accepted By:** |  |
| **Signed:** |  |
| **Date:** |  |

All nominations must be accompanied by the Registration of Interest form (found in the Election Kit).

Please return this form to (insert contact) no later than (date).

|  |  |
| --- | --- |
| (Name)Returning Officer(Contact details) | (Name)CEO (or equivalent)(Contact details) |

***Note:*** *Elements of this nomination form may need to be altered to fit with your organisations constitution. Please ensure that it meets the requirements of your constitution before using this form.*