[Insert organisation name/logo]

**BOARD MEMBER NOMINATION FORM**

## [insert frequency] ELECTIONS

To be held at the Annual General Meeting of the [insert organisation’s name] on [date].

### POSITIONS AVAILABLE

* [list position/s available]
* [list position/s available]

**PLEASE READ THE FOLLOWING CONDITIONS CAREFULLY BEFORE COMPLETING THE NOMINATION FORM AND RETURNING IT TO [insert organisation’s name]:**

1. Only one person is to be nominated per nomination form.
2. Please note that members eligible to nominate for the Board, or to propose or second a nomination, are only those accredited delegates whose names are currently registered with [insert organisation’s name] by themselves or their representative organisations.
3. Nomination forms must be fully completed before being sent. This includes details of the proposer and seconder. If you cannot find a proposer or seconder, please contact [insert organisation’s name] well before the **due date of [insert date]** and [insert organisation’s name] can assist in putting you in touch with members.
4. Please attach a brief biography of the nominee, no more than one paragraph.
5. [Insert any other conditions, e.g. membership payment, etc.]
6. Nominations can be posted, hand delivered to:

[insert address]

Scanned and emailed copies of nomination forms will be accepted by email to [insert email address].

**Any questions about the nomination process, please contact [insert contact person] on [insert phone number] or [insert email address].**

**Nominations must be received not later than [insert date].**

[insert Organisation’s name] BOARD DIRECTOR NOMINATION FORM

**Note: USE A SEPARATE FORM FOR EACH NOMINATION**

**(USE BLOCK LETTERS)**

**NOMINATION:**

We the undersigned Proposer wish to nominate:

\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

title first name surname

From organisation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROPOSER:**

Name of proposer: \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

title first name surname

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

date signature of proposer

From organisation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECONDER:**

Name of seconder: \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

title first name surname

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

date signature of proposer

From organisation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACCEPTANCE OF NOMINATION:**

Name of Nominee: \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

title first name surname

Organisation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No. (M)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (W)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby accept the nomination: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

date signature of nominee

I hereby declare that I am not on the Disqualified Persons Register with ASIC or ACNC

*([insert organisation’s name] must check this directly with ASIC and ACNC).*

\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

date signature of nominee

Office use only: Authorised by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[insert name, insert position]