



NOMINATION FORM

(Please Print)

I, _____ **(Nominator name)** hereby nominate

_____ **(Nominee name)**, a member in good

standing, to run for the position of _____

Or if nominated for a position I will let my name stand

Signature of Nominator

Department

Date

Signature of Nominee

Department

Date

Candidate Email : _____

Cell Number : _____

RETURN SIGNED FORM BY:

EMAIL recsecretary@cupe4900.com (you will receive
email confirmation)

****DEADLINE is 1 hour prior to the meeting****

**CUPE LOCAL4900
P.O Box 4
Newmarket STN Main, Ontario, L3Y 4W3**