## BOARD NOMINATION FORM

**ELECTION TO BOARD NOMINATION FORM**

(Nominees and proposers must be delegates of current financial members)

**I nominate the following person:**

|  |  |
| --- | --- |
| **Full Name** |  |
| **Member organisation**  |  |
| **Address** |  |
| **Phone (work)** |  | **(mobile)** |  |
| **Email** |  |

 **For the position of Director of the NADA Board.**

**Nominated by\*:**

*(Can be from same or other member organisation)*

|  |  |
| --- | --- |
| **Full Name** |  |
| **Member organisation**  |  |
| **Address** |  |
| **Email** |  |
| **Signature** |  |
| **Date** |  |

**Nominee:**

I accept the above nomination for election to the NADA Board. The organisation I represent is a current financial member of NADA.

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

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

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

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

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

***I attach a brief profile (over page) of my experience / interests which may appear on voting material at the AGM.***

### PROFILE OF NOMINEE

(WILL BE CIRCULATED AT THE AGM)

**FULL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OCCUPATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BACKGROUND AND PROFESSIONAL EXPERIENCE (INCLUDING BOARD EXPERIENCE):***Max 200 word limit*

|  |
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|  |

**REASONS FOR NOMINATION:***Max 200 word limit*

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| --- |
|  |

**Nominations must be posted, faxed, emailed or hand-delivered to**

**The NADA Secretariat, NADA, PO Box 1266 Potts Point NSW 1335 or**

**admin@nada.org.au by close of business on 14 October 2019**

|  |
| --- |
| **For office use** |
| NADA staff sighted  | **Signature:** | **Date:** |