

COMMITTEE OF MANAGEMENT NOMINATION FORM
(PLEASE PRINT CLEARLY)

Nominations must be submitted in accordance with Rule 4 (i) – 4 (vi).

Nominations of candidates for election as officers of the Association or as ordinary members of the Board must be:

- Made in writing, signed by two members of the Association and accompanied by the written consent of the candidate (which may be endorsed on the form of the nomination); and
- Delivered to the Secretary of the Association not less than 7 days before the date fixed for the holding of the Annual General Meeting.

Nomination for the position of:

Chairperson, Deputy Chairperson / Ordinary Board Member
(Strike out those positions not applicable)

Nominee:

Given name: _____ **Family name:** _____

Address: _____

_____ **Post code:** _____

Phone: _____ **Mobile:** _____

Email: _____

Nominees' Statement: I am over 18 years and over.
I have a commitment to BDNH's Strategic Plan.
I hereby accept nomination to the BDNH Inc., Committee of Management.

Nominee's Signature: _____ **Date:**/...../.....

Nomination by two full members of the BDNH Inc.

Nominated by: (Name) _____

Signature: _____ **Date:**/...../.....

Seconded by: (Name) _____

Signature: _____ **Date:**/...../.....

Nominees, please complete the following information to support your nomination.

What involvement have you had in a community nursing services sector or related services?

What other activities have you been involved with which would be relevant to being a BDNH Committee of Management member?

What particular skills, knowledge or attitudes would you bring to the BDNH Committee of Management?

PERSONAL STATEMENT: Why do you believe you should be elected to the BDNH Committee of Management?

PLEASE RETURN THIS FORM TO:

The Chairperson,
Ballarat District Nursing and Healthcare
1818 Sturt Street
Ballarat Vic 3350 Fax: 03 53341945 Email: ceo@bdnh.com.au

NO LATER THAN 5.30pm on (Date):/...../.....