

NOMINATION ACCEPTANCE FORM

DATE:	, 20
TO:	ELECTION COMMITTEE
UNIT NAME:	
POSITION AS PER NOTICE:	
NOMINEE'S (PRINT WITH CAPIT,	
	LAST NAME:
CLOCK#/EMPLO	YEE#
EN	1AIL:
TEL/	CELL:
OPTIONAL: it	s the candidate responsibility to submit a .jpeg photo (PASSPORT style preferred) <u>and/or</u> literature in <u>PLAIN TEXT ONLY</u> (No photos, No formatting)
	Submission deadline will be posted on the Election Notice.
	omissions will be posted as is, email files separately to admin@unifor112.ca
All me	mbers are considered nominated if they have continuous good standing as follows:

For the Executive Board positions: **1 year** • For Unit positions: **6 months**, and those accepting nominations **MUST** submit this "Nomination Acceptance Form" completed & signed prior to the posted closing date.

By signing this nomination form, I hereby agree to follow all election rules & guidelines.

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