

NOMINATION ACCEPTANCE FORM

DATE: _____, 20__

TO: Election Committee

UNIT NAME: _____

UNIFOR Local 112

FROM:

Print First Name (CAPITAL BLOCK LETTERS)

Print Last Name (CAPITAL BLOCK LETTERS)

CLOCK#: _____

ADDRESS: _____

City Postal Code

Tel/Cell: () _____

NOTE: Online voting supports candidate pictures and literature to be displayed on the online ballot. It is the candidate responsibility to submit a **picture** in .jpeg format and/or a literature in .word format

All submissions will be posted as is.

Submissions deadline will be posted on the notices; email files separately to admin@unifor112.ca

All members are considered nominated if they have continuous good standing as follows:

For the Executive Board positions: 1 year ▪ For the Shop Stewards/ Committeepersons positions: 6 months, and those accepting nominations **MUST** submit this "Nomination Acceptance Form" prior to the posted closing date.

By signing this nomination for the
position of _____
TYPE POSITION'S NAME EXACT AS PER NOTICE

(Print position's name from notice, **ONLY** one (1) position per form)

I hereby agree to follow all election rules and guidelines.

Signature of Nominee