Board Nomination Form

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| --- | --- |
| Your Name | Click here to enter text. |

I nominate for the IABC/Calgary 2017/2018 Board position:

**Myself**  ☐

or

**an IABC/Calgary member** ☐

|  |  |
| --- | --- |
| Their Name | Click here to enter text. |

**Seconder**

If you are nominating yourself, please ask another IABC/Calgary member in good standing to second your nomination.

If you are nominating someone else, please sign as the Seconder.

**Name of Seconder** Click here to enter text.

Seconder’s Signature



**Please Note***: a digital signature here is acceptable. If you can’t type your name above* (if the file opens in protected view, click**Edit Anyway***), please indicate in a cover email that you agree to be the Seconder for this Nominee.*

**Portfolio preferences**

In order of preference, please list three board portfolio positions you are interested in as a director or manager: Please refer to the Director Roles in this Nomination Package for more information about each portfolio and directors’ responsibilities:

|  |  |
| --- | --- |
| Option 1 | Click here to enter text. |
| Option 2 | Click here to enter text. |
| Option 3 | Click here to enter text. |

**Nominee’s Contact Information**

|  |  |
| --- | --- |
| **Name** | Click here to enter text. |
| **Street Address** | Click here to enter text. |
| **City, Province & Postal Code** | Click here to enter text. |
| **Home Phone** | Click here to enter text. |
| **Work Phone** | Click here to enter text. |
| **E-Mail Address** | Click here to enter text. |
| **Membership #** | Click here to enter text. |

**Nominee: *please tell us about yourself***

Please tell us why you are interested in being part of IABC/Calgary’s Board:

Click here to enter text.

**Personal biography** (max 50 words) *If you are successful in gaining a position on IABC/Calgary’s Board,* *this information will be posted on the IABC/Calgary website*)

Click here to enter text.

**Relevant skills, qualifications, & work experience**

Please summarize your relevant skills, qualifications and work experience:

Click here to enter text.

Please remember to attach a copy of your resume.

**Previous volunteer experience**

Please summarize your volunteer experience with IABC/Calgary and elsewhere:

Click here to enter text.

**Are you a good fit with IABC/Calgary?**

What three personal attributes make you the best candidate?

Click here to enter text.

What would be your top three priorities for IABC/Calgary during your term?

Click here to enter text.

**Nominee’s Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal from the board.

**Nominee’s Signature**



**Please Note***: a digital signature here is acceptable. If you can’t type your name above* (if the file opens in protected view, click**Edit Anyway***), please indicate in a cover email that you agree to be the Seconder for this Nominee.*

Thank you for completing this Nomination Form and for your interest in volunteering with IABC/Calgary.

If you have any questions, please contact Nominations Committee Chair, Sheila Carruthers, at 403 225 9733 or [sheila@csrstrategies.ca](mailto:sheila@csrstrategies.ca)

Please remember to attach a copy of your resume with your submission.