



CALA BOARD OF DIRECTORS NOMINATION FORM

For nominations from the floor of the 25th Annual General Meeting, June 2, 2014

Candidate's Name: _____

Organization/Position: _____

Phone/Fax: _____

Email: _____

I have read and understand the obligations, duties and responsibilities inherent in a CALA Board of Director position and hereby agree to let my name stand for election to the Board.

Candidate's Signature: _____

To be accepted as a nomination at the meeting, this form must be accompanied by information from 26 members in good standing as seconders to the nomination. (5% of the membership; See pg. 2).

Nominator's Name: _____

Organization: _____

Phone/Fax: _____

Email: _____

Nominator's Signature: _____

This completed form along with a completed *Director Skills and Knowledge Questionnaire* (doc ref no. F27), a Curriculum Vita, a biography (300 words or less) and any other complementary information must be presented to the Chair of the AGM before the opening of the meeting or to:

CALA Executive Assistant, Charlette Mallette
310-1565 Carling Ave.
Ottawa, ON K1Z 8R1
cmallette@cala.ca
Fax: 613-233-5501



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Seconders to the Nomination:

	Name (printed)	Organization	Signature
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Only members in good standing may second the nomination. A seconder may represent an institutional member or be an individual member.