

Nominations Form for CAPE NATIONAL EXECUTIVE MEMBER

This section is to be completed by the Sponsor

I hereby nominate _____ to the position of National Executive Director of the Association representing the; **(please select the corresponding group below)**

EC Group	TR Group

Name (please print)	
Department	
Bargaining Unit	
Contact telephone number	
Date	
Signature	

This section is to be completed by the candidate

I, **(please print)** _____ accept the nomination to the position of National Executive Director.

Name (please print)	
Department	
Bargaining Unit	
Contact telephone number	
Date	
Signature	

This section is to be completed only if a scrutineer is designated

I nominate **(please print)** _____ to act as scrutineer on my behalf, and to perform the duties specified, and abide by the regulations promulgated by the Elections Committee.

I, **(signature of scrutineer)** _____, agree to act as scrutineer and swear that I will not disclose any results of the election in advance of the official announcement of the election results.

Instructions

1. Nominations must be returned to the National Office by **regular mail and postmarked no later than June 15, 2005.**
2. Nomination forms shall be accompanied by a one page (8 1/2 x 11) text using Arial 12 point font in which the candidate shall provide a biography and his/her reason for running.