

INSTRUCTIONS FOR COMPLETING NOMINATION FORM

Agriculture Union Equal Opportunities Committee Regional Representatives are elected at the first Regional Seminar following the Agriculture Union Triennial Convention. Elected representatives will serve a three (3) year term of office as per the Agriculture Union Bylaws and Regulations.

Nominations for the position of Agriculture Union Equal Opportunities Committee Regional Representative will be accepted from Agriculture Union members in good standing who are unable to attend the Regional Seminar. Nominations will also be accepted from delegates to each Regional Seminar.

To be nominated for the position of Equal Opportunities Regional Representative, a member must:

- 1. Be a PSAC Agriculture Union member in good standing
- 2. Be nominated and seconded by a member (in good standing) attending the Regional Seminar.

For nominations submitted prior to the Regional Seminar in cases where the nominee cannot attend Regional Seminar, they shall be entitled to submit a one-page biography that will be read out at the Regional Seminar by the Regional Vice-President conducting the elections.

Completed nomination forms must be submitted to the Local President <u>and</u> to the Regional Vice-President prior to the start of the Regional Seminar.

For more information, please contact your Regional EO Representative or the National Director, Equal Opportunities.



NOMINATION FORM

Regional Representative Equal Opportunities Committee Agriculture Union (PSAC)

| Please check position(s) being nominated | TOT: |
|---|---|
| ☐ Agriculture Union Regional EO Rep☐ <u>Alternate</u> Agriculture Union Regional | |
| 1. Nominee Information | |
| Name: | Membership Number: |
| Address: | Local: |
| City: | Home Phone: |
| Prov./Postal Code: | Work Phone: |
| E-mail: | |
| I am currently a PSAC Agriculture Union r nomination (signature required): Signature | nember in good standing and accept this Date |
| 2. Nominated By: | Date |
| Name: | Membership Number: |
| Home Phone: Work Phone: | Local: |
| As an attendee to the (state Region) nominate (name of person) Union Regional EO Representative or Alte | |
| Signature | Date |

(over please)

3. Seconded By:

| Name: | Membership Number: |
|---|--|
| Home Phone: Work Phone: | Local: |
| As an attendee to the (state Region)second (name of person)Regional EO Representative or Alternate. | Regional Seminar, I hereby for the position of Agriculture Union |
| Signature | Date |