

## NOMINATIONS FORM FOR CAPE PRESIDENT

**This section is to be completed by the Sponsors**

We hereby nominate \_\_\_\_\_ as President of the Association.

**(Sponsorship of 10 Regular or Pending Members of the Association)**

Name ( <b>Please Print</b> )	Dept.	Bargaining Unit	Contact Tel. #	Signature	Date

**This section is to be completed by the candidate**

I, (**please print**) \_\_\_\_\_ accept the nomination to the position of President.

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 and Resolutions 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. Completed nomination forms in any format with verifiable signatures shall be received at the National Office **no later than September 1, 2008.**
2. Nomination forms may be accompanied by up to two pages (8 1/2 x 11) of text using Arial 12 point font or equivalent in which the candidate shall provide a biography and his/her reason for running, contact information

and a website address.