

Form continues on next page

# **Nomination Form**

Operations Staff Representatives to

# **EDUCATION COUNCIL**

To: Registrar, College of New Caledonia				
We, the undersigned, wish to nominate, as a representative of the Operations Staff for a two (2) year term commencing May 1, 2025.				
	SIGNATURE	NAME PRINTED	DEPARTMENT	
1				
2				
3				
4				
5				



### **Nomination Form**

Operations Staff Representatives to

### **EDUCATION COUNCIL**

#### **Statement of Nominee**

I am willing to stand for election to the Education Council as a representative of Operations Staff for a two (2) year term commencing May 2025, and to abide by the election rules as established by the Registrar and representative groups.

Candidate's Statement: (No more than 200 words)				
Name as I want it to appear on the ballot:				
Department:				
Signature of Nominee:	Date:			
Please return this form to <a href="mailto:electionscnc@cnc.bc.ca">electionscnc@cnc.bc.ca</a> or to Room 1-763.				

**Note:** Nominations must be received in the Registrar's office by April 7<sup>th</sup> at 4:00 pm to be valid.