# Nomination Form

**Nominee details**

Please insert the details of the person you would like to nominate to be part of the **[Insert organisation name]** board of directors.

|  |  |
| --- | --- |
| **Full name**  |  |
| **Address** |  |
| **Phone** |  | **Mobile** |  |
| **Email**  |  |
| **Please provide a brief summary about what skills and experience the nominee will bring to the [Insert organisation name]**  |
|  |
| **Consent provided by the nominee** |
| **Name of nominee** |  |
| **Signature** |  | **Date** |  |

**Nominator details**

As a current member of **[Insert organisation name],** please insert your contact details to validate the nomination.

|  |  |
| --- | --- |
| **Full name**  |  |
| **Address** |  |
| **Phone** |  | **Mobile** |  |
| **Email**  |  |
| **Signature**  |  | **Date** |  |

Nominations must be emailed or hand delivered to:

**[Insert organisation address and contact details]**

Before **[Insert closing date for nominations]**