

## **BOARD OF DIRECTORS**

## NOMINATION FORM

## **Deadline for nominations:**

Wednesday, February 8, 2017, 4:30 p.m. Faculty Association office, Education Tower 1402

We, the undersigned, hereby n	ominate:	
NAME OF NOMINER	3:	
Faculty/Department: _		
Home Phone:	Office Phone:	
Email Address:		
Nominees must be current menhave held a sessional position  Three nominators are required	at some point since May 1, 2	tion as of February 8, 2017, or 2016.
NAME (please print)	SIGNATURE	DEPARTMENT
Nominators must be current methan two candidates.	embers of the Association. N	o member may nominate more
<b>Consent of the Nominee:</b>		
I hereby consent to allo of Directors of the Fac	owing my name to stand as a ulty Association.	nominee for the Board
SIGNATURE OF NOMINEE	:	
Nominations must be accompa which will be circulated with t	•	ent of no more than 100 words, o.

Tel: (403) 220-5722 Fax: (403) 284-1976 Faculty.Association@tucfa.com www.tucfa.com

Calgary, Alberta T2N 1N4

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2500 University Drive N.W.