

NOMINATION FORM 2021 PSAC-NCR Regional Convention May 14 – 16, 2021

Nominee Information:

Name: _

Address:Com	ponent/Directly
City/Prov.:Char	tered Local:
	I/Branch:
Phone (home):	
I consent to my nomination as a candidate for election for the office indicated above and,	
certify that I am eligible for such nomination and if elected, signify my willingness to	
accept and to perform the duties of that office.	
Signature of nominee	Date
Nominated by: blic Service Allia	Seconded by:
Name:	Name:
Alliance de la Fonction p	ublique du Canada
Delegate No.:	Delegate No.:
I nominate	
	I second
for the position of	
	for the position of
Signature of Nominator*	Signature of Seconder*
Date	Date
*Must be a delegate to the 2021 PSAC-NCR Regional Convention	

PSAC Membership No.:_____