



Nomination for Joint Committee Member

Nominations are open to anyone who is a Member in Good Standing of the UNA and who is covered by the UNA Provincial Agreement.

Name of District:

North District

South Central District

North Central District

South District

Central District

Name and address of nominee:

NAME (PLEASE PRINT)

ADDRESS

CITY

POSTAL CODE

If elected I am willing to serve:

SIGNATURE

Name and address of two (2) members who are covered by the UNA Provincial Agreement, and who are in good standing, of the applicable district, who are nominating the nominee:

NAME (PLEASE PRINT)

ADDRESS

SIGNATURE

CITY

POSTAL CODE

NAME (PLEASE PRINT)

ADDRESS

SIGNATURE

CITY

POSTAL CODE

****NOTE:** Nominations shall be accepted until seven (7) days prior to the District Meeting at which elections will occur.

****NOTE:** It is the responsibility of the Nominee to confirm with the Executive Administrative Assistant, or designate, the receipt of the nomination form.

FOR OFFICE USE ONLY

RECEIVED BY: _____

DATE & TIME: _____