



NOMINATION FORM

Nominee's Name (Print) _____

Address (Home) _____

Phone (Home) – _____ (Work) – _____

Work Centre – _____

I accept the nomination for the position of _____ and in so doing agree to accept the responsibilities of that position and to look after the interests of Unifor Local 25 and its members if elected.

Nominee's Signature _____ Date _____

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We the undersigned members of Unifor Local 25 do hereby enter this candidate into nomination for the position of _____. In so doing, we have complied with the election rules of this Local.

Nominators Name (Print)	Signature	Phone Number	Work Centre
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Note: A minimum of three (3) nominators are required.

Candidates as well as nominators must be Local 25 members in good standing, email confirmation by nominator for electronic signatures required.

Return this and any relevant supporting documents to: elections@unifor25.com