

## NOMINATION FORM

### AMS SECURITY BARGAINING COMMITTEE

I THE UNDERSIGNED NOMINATE \_\_\_\_\_

BARGAINING UNIT \_\_\_\_\_

WORK MAILING ADDRESS \_\_\_\_\_

WORK EMAIL \_\_\_\_\_ WORK PHONE \_\_\_\_\_ WORK FAX \_\_\_\_\_

HOME EMAIL \_\_\_\_\_ HOME PHONE \_\_\_\_\_ OTHER \_\_\_\_\_

**CANDIDATES FOR BARGAINING COMMITTEE MEMBER MUST BE NOMINATED BY ONE MEMBER IN GOOD STANDING.  
PLEASE PRINT LEGIBLY**

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Work Location)

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"I agree, if elected, to accept the position of BARGAINING COMMITTEE MEMBER of **MoveUp.**

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

**EMAIL ADDRESS: [Ljeffery@MoveUPTogether.ca](mailto:Ljeffery@MoveUPTogether.ca)**

**OR PLEASE FAX TO 604-299-8211**

**NOMINATION FORMS MUST BE RECEIVED BY 4:30 PM ON March 11, 2016.**