### NOMINATION FORM

**Alma Mater Society - BARGAINING COMMITTEE**

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

EMPLOYER

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)

--------------------------------------------------------------------------------------------------------------------------------

**“I agree, if elected, to accept the position of BARGAINING COMMITTEE MEMBER of MoveUP.**

[ ]  I am a MoveUP Job Steward

Date: Signed:

**EMAIL ADDRESS:**  kquinn@MoveUPTogether.ca

OR PLEASE FAX TO 604-299-8211

.

NOMINATION FORMS MUST BE RECEIVED BY 4:00 pm ON Friday, March 26, 2021

KQ/hp-usw2009