



Chapter Committee Nomination Form 2019

Date ___ / ___ / 2019

Full Name of the nominee (you may nominate yourself if you wish to do so)	
Contact Phone Number	
Email	
For the position of: (Please tick)	<input type="checkbox"/> National Treasurer Auckland <input type="checkbox"/> Chair <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> General Committee Member Christchurch <input type="checkbox"/> Chair <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> General Committee Member Wellington <input type="checkbox"/> Chair <input type="checkbox"/> Secretary <input type="checkbox"/> Treasurer <input type="checkbox"/> General Committee Member
Nominated by:	
Signature of Nominee:	

Send to rbirchmore@unitec.ac.nz