



2012 ELECTION OF NATIONAL PRESIDENT

CANDIDATE NOMINATION FORM

The following CAVUNP member is nominated for National President

Name: _____ Given Name: _____ Initials: _____

Membership Number _____ And is a member of CAVUNP Chapter _____

Mailing Address: (Apartment/Unit/Street Number) _____ Street Name and Type _____

City/Town/Municipality/etc _____

Province _____ Postal Code _____ Home Phone Number _____

E-Mail Address _____

NOMINATING MEMBER

Name of Nominating Member: _____ Membership Number _____

Signature of nominating member: _____

MEMBER SECONDING NOMINATION

Name of Member seconding Nomination: _____ Membership Number _____

Signature of Member seconding Nomination: _____

NOMINATED MEMBER

I accept this nomination for National President:

(Signature of Nominated Member)

(Date)

REGIONAL DIRECTOR

Enclosed herewith nomination and copy of Biographical sketch or Curriculum Vitae (CV) of this nominee.

(Signature of Regional Director)

(Date)