

### 1 NOMINATOR

*I, the undersigned member, nominate the individual named below for the position indicated.*

Nominator's Full Name

---

Nominee's Full Name

---

Position Nominated For

---

Site / Area / Local

---

Signature

Phone No.

---

Email Address

---

### 2 NOMINEE ACCEPTANCE

*I, the nominee named above, accept the nomination for the referenced position and make the following Oath of Nomination and Office as per CUPE National Constitution:*

***"I promise to support and obey the Constitution, goals, principles and policies of the Canadian Union of Public Employees."***

Signature

Phone No.

---

Email Address

---

Forward signed copy to:

[cupe5021@cupe.ca](mailto:cupe5021@cupe.ca)