



NOMINATION FORM FOR  
BOARD OF DIRECTOR MEMBER

**Candidate Information:**

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province: \_\_\_\_\_

State: \_\_\_\_\_

Zip/Country Code \_\_\_\_\_

Country \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Has this nominee been informed of this nomination and is the person willing to serve?  Yes  No

*Please submit the nominee's bio and a detailed letter of recommendation stating why the nominee is qualified for a leadership role with the Global Ageing Network. In particular, show how the person embodies leadership values of integrity, creativity, collaboration, commitment, and diversity.*

**Please submit this form and supporting materials electronically by 31 July 2017 to:**

**Person Submitting Nomination:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-mail

*(Form can be typed into and saved as a PDF)*