

NOMINATION FORM

I hereby nominate _____

for the office of _____

of the VIU Faculty Association for the term **May 1, 2021 – April 30, 2022.**

Date

Signed (*nominator*)

Nominator print name

I accept this nomination.

Date

Signed (*nominee*)

Please return the completed nomination form to one of the Elections Committee members or to the VIUFA Office, Building 360, Room 108 by 3:00 p.m. on Wednesday, April 21, 2021. Forms can also be sent electronically to staff@viufa.ca.

Certified by: