



EXECUTIVE COMMITTEE - NOMINATION FORM

Before completing this document, please refer to the [information sheet](#).

CANDIDATE

First Name:

Surname:

Email address:

Telephone number:

Full mailing address:

Open positions :

President

Vice President

Treasurer

I hereby request the Nominating Committee's approval to become a candidate for the CANB Executive Committee, committed to ensuring the vitality of Council of Archives New Brunswick's workforce.

Date:

Nominee's signature:

NOMINATOR

Member Organization:

Name of contact person:

Email address:

Telephone number:

NOMINATING COMMITTEE (Review) – Candidate does not complete this section

The form shall be signed both by the President of CANB and another committee member.

Chair of Nominating Committee

Name:

Surname:

Signature:

Nominating Committee member

Name:

Surname:

Signature:

**We, _____ and _____, hereby
nominate the individual presented above to be candidate for the Council of Archives New
Brunswick Executive Committee.**