



REPLY TO  
secretary@apsa.net.au



## NOMINATION FORM FOR OFFICE BEARERS AND COMMITTEE MEMBERS 2024

Nominations must be made in writing, signed by 2 members of a Member of the Association, who must be Full and / or Senior financial members and must be at least 18 years of age and accompanied by the written consent of the candidate (which may be endorsed on the form of the nomination), and must be delivered to the Secretary of the Association at least 7 days before the date fixed for the holding of the AGM.

Nominees must be a fully accredited financial member of a Member. (for clarity min Level 1 accredited)

PROPOSED BY:

I, \_\_\_\_\_(full name)

Of, \_\_\_\_\_(full address)

Signature \_\_\_\_\_(Proposed)

AND PROPOSED BY:

I, \_\_\_\_\_(full name)

Of, \_\_\_\_\_(full address)

Signature \_\_\_\_\_(Seconded)

# NOMINATION FORM FOR OFFICE BEARERS AND COMMITTEE MEMBERS 2024

NOMINATE: \_\_\_\_\_(full name of nominee)

Of, \_\_\_\_\_(full address)

Signature \_\_\_\_\_ (Nominee) Date \_\_\_\_\_

Being a member of \_\_\_\_\_ (State PSA) and having given their consent nominate for the position of (please circle):

OFFICE BEARER POSITIONS:

- President
- Vice President

ORDINARY COMMITTEE MEMBERS POSITIONS:

- Member Protection Officer/Complaint Officer
- Accreditation Officer

Please briefly explain any relevant experience or other information that you would like included on the ballot form

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