

CALL FOR NOMINATIONS TO THE CHAMBER'S BOARD OF DIRECTORS 2016 - 2017

In accordance with the Lincoln Chamber of Commerce By-Laws, the Chamber is calling for nominations for the upcoming 2016/17 Board of Directors for the term September 2016 - September 2017. All Board of Director nominations should be made in writing, signed by the Nominee and submitted to the Manager of the Lincoln Chamber, not later than August 12, 2016. The Chamber's Annual Meeting is planned to take place the last week of September at which time the new Board will officially be voted in. If you wish to volunteer your time on the Chamber's Board please see the criteria below, complete this form for submission in person, by fax or email. Thank you.

Eligibility Criteria and Conditions of Appointment

- (a) Directors must be at least 18 years old.
- (b) Directors must be a member in good standing of the Lincoln Chamber of Commerce.
- (c) A Director is expected to commit the time required to perform board and committee duties. The term of office that we request is 2 years and the minimum time commitment per month is approximately 3-5 hours approximately per month, which includes a 2 hour Board Meetings the first Monday of every month other than July.
- (d) Directors must fulfill the requirements and responsibilities of their position, for example, preparing for and attending board and committee meetings, upholding their obligation to the Chamber, and working co-operatively and respectfully with other board members. Directors must comply with the legislation governing the Chamber's by-laws and policies, and all other applicable rules.

NOMINEE INFORMATION

Surname:		First Name:	
BUSINESS NAME:			
Business Address:			
City:	Province:	Postal Code:	
Business Phone Number:		Business E-mail:	
Preferred Method of Contact: Home Phone <input type="checkbox"/> Business Phone <input type="checkbox"/> HOME E-mail <input type="checkbox"/> Business E-mail <input type="checkbox"/>			
If Home Phone or Home Email Please Indicate:			
Home Phone:		Home Email:	

Declaration

By submitting this Nomination application, I declare the following:

- (a) I meet the eligibility criteria and accept the conditions of appointment set out above.
- (b) I certify that the information in this application is true.

SIGNATURE: _____ Date: _____

PRINT NAME: _____