

Memorandum

To: MNU Board Members
Regional / Local / Worksite Presidents

From: Nominations & Elections Committee

Date: November 2021

Re: **MNU President Election**

As per the MNU Constitution, the President is to be elected from the general membership for a two (2) year term by voting delegates at the Annual General Meeting. This election will occur at the 2022 AGM.

The nomination form is attached. Please refer to the rules for election found in the MNU Handbook under Section C. The People. A summary is attached.

PLEASE NOTIFY YOUR MEMBERS OF THE CALL FOR NOMINATIONS FOR THE POSITION OF PRESIDENT.

The deadline for receiving nominations is FRIDAY, JANUARY 14TH, 2022.

Manitoba Nurses Union Executive Officer Nomination Form

I, _____
(Name of nominator - please print name)

a member in good standing of the Manitoba Nurses Union, do hereby nominate:

(NAME OF NOMINEE - PLEASE PRINT NAME)

(NAME OF REGION AND LOCAL / WORKSITE)

(NOMINEE MAILING ADDRESS)

(POSTAL CODE)

(NOMINEE PERSONAL EMAIL)

(NOMINEE PERSONAL PHONE)

who is a member in good standing of the Manitoba Nurses Union for election to the position of **PRESIDENT** for the term starting July 1st, 2022 to June 30th, 2024.

Signed this _____ day of _____, 2021/22.

(SIGNATURE OF NOMINATOR)

(NOMINATOR ADDRESS)

(POSTAL CODE)

Member of the _____ Nurses

Local / Worksite # _____

All nominations and resumes must be properly scanned, emailed (twood@manitobanurses.ca), mailed, faxed (204 942 0958) and/or delivered. Nominations WILL NOT BE accepted if taken by picture on phone or sent by email in an unidentified link; unidentified links may contain a virus. When sending nominations by email, please send as an attachment with a description in the subject line and body of the email. The applicant must ensure their contact information is accurate. The applicant must respond no later than 48 hours after being contacted by the Chairperson of an incomplete application. DEADLINE FOR SUBMISSION OF NOMINATION IS BY MIDNIGHT ON FRIDAY, JANUARY 14TH, 2022.

Supported by the following MNU members in good standing:

1. _____
(please print name) _____
(address)

(signature)
2. _____
(please print name) _____
(address)

(signature)
3. _____
(please print name) _____
(address)

(signature)
4. _____
(please print name) _____
(address)

(signature)

I accept the nomination: _____
(Signature of nominee)

- CHECKLIST:
- Nomination Form Required.
 - Blanks Filled-In to Nomination Form.
 - Resume Required.
 - Photo of Nominee (optional).

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