ᐸᐅᒃᑑᑎᑦ
ᐃᓄᐃᑦ ᐊᕐᓇᐃᑦ ᑲᓇᑕᒥ
PAUKTUUTIT
INUIT WOMEN OF CANADA

ᑲᖏᕐᓱᐊᓗᖕᒥ ᓯᕿᓂᕐᒥᐅᑦ

Nunavik Hudson Region

ᓂᕈᐊᒐᒃᓴᖕᖑᕐᑎᑦᑎᔾᔪᑎ

Nomination Form

ᐸᐅᒃᑑᑎᑦ ᐊᐅᓚᑦᑎᔨᑦ ᑲᑎᒪᔨᖏᑦ

Paukutuutit Board of Directors

ᐊᑯᓂᐅᓂᖃᔾᔭᖓᓄᑦ ᒫᑦᓯ 2010 ᑎᑭᓪᓗᒍ ᒫᑦᓯ 2012

For the Term March 2010 to March 2012

ᓂᕈᐊᕋᑦᓴᓕᐊᖑᔪᖅ: ______________________________

ᑐᕋᕈᑎᖓ: ______________________________

ᐅᖃᓚᐅᑎᖓ ᓱᑲᑦᑐᒃᑯᕈᑎᖓᓄ: ______________________________

Name of Candidate (Please print): ______________________________

Address: ______________________________

Phone/Fax Number: ______________________________

ᓂᕈᐊᕋᑦᓴᓕᐅᖅᑐᖅ: ______________________________

ᑐᕋᕈᑎᖓ: ______________________________

ᐅᖃᓚᐅᑎᖓ ᓱᑲᑦᑐᒃᑯᕈᑎᖓᓄ: ______________________________

Nominated by (Please print): ______________________________

Address: ______________________________

Phone/Fax Numbers: ______________________________

ᐊᐃᑉᐱᔪᖅ: ____

ᑐᕌᕈᑎᖓ:____

ᐅᖃᓚᐅᑎᖓ ᓱᑲᑦᑐᒃᑰᕈᑎᖓᓄ:______________________________________

Seconded by (Please print):____

Address:____

Phone/Fax Number:____

ᑎᑎᕋᕐᓗᑎᑦ ᓱᒻᒪᑦ ᓂᕈᐊᕈᒪᖕᒪᖕᒐᖅᐱᐅᒃ ᐅᓇ ᐊᕐᓇᖅ:

Explain the reason why you are nominating this woman:

____

____

____

____

____

ᓂᕈᐊᕋᑦᓴᓕᐅᖅᑐᖅ ᐊᒻᒪᓗ ᓂᕈᐊᕋᑦᓴᓕᐊᖑᔪᖅ ᓇᓗᓇᐃᖅᓯᓂᖕᒋᑦ ᐊᑎᓕᐅᕐᓂᒃᑯᑦ:

Nomination accepted by the candidate (signature of candidate required):

____

ᓂᕈᐊᕋᑦᓴᓕᐊᖑᔪᖅ: ᓂᕈᐊᕋᑦᓴᓕᐅᖅᑐᖅ: ᐊᐃᑉᐱᔪᖅ:

____

Candidate: Nominator: Seconder:

ᐅᓪᓗᖓ/**Date:**____

ᖃᐅᔨᒪᔭᐅᒋᐊᓕᒃ:
ᐊᒥᓱᓕᐊᖑᒍᓇᖅᑐᖅ ᐅᓇ ᑐᓂᐅᖅᑲᖅᑕᐅᓗᑎᒃ ᐱᔪᒪᔪᓄᑦ.
ᐊᕐᓇᐃᑦ ᐃᓄᐃᑦ ᑭᓯᐊᓂ ᓂᕈᐊᕋᑦᓴᓕᐅᕈᓇᖅᑐᑦ ᐅᕝᕙᓗ ᐊᕐᓇᐃᑦ ᐃᓄᐃᑦ ᓂᕈᐊᕋᑦᓴᓕᐊᖑᒍᓇᖅᑐᑦ ᐸᐅᒃᑑᑎᒃᑯᑦ ᑲᑎᒪᔨᖏᓐᓄᑦ.

Note:
Please reproduce this form as required.
Only Inuit women can nominate and only Inuit can be nominated for the Pauktuutit Board of Directors.

ᑕᓐᓇ ᑕᑕᑎᓐᓂᐊᓕᒃ ᓱᑲᑦᑐᒃᑰᖅᑎᓪᓗᒍ 5:00ᒎᓚᐅᓐᖏᓐᓂᖓᓂ <u>ᒫᑦᓯ 19, 2010</u> ᐊᓂᒍᓚᐅᖅᑎᓐᓇᒍ ᐅᕗᖓ 613-238-1787

PLEASE FAX THIS FORM BY 5:00pm (EST) <u>MARCH 19, 2010</u> TO 613-238-1787