

ᐋᐃᑦᐱᑦ: _____

ᐅᑦᑦᑦ: _____

ᐅᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦ: _____

Seconded by (Please print): _____

Address: _____

Phone/Fax Number: _____

ᑦᑦᑦᑦᑦ ᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᐅᑦ ᐋᑦᑦᑦ:

Explain the reason why you are nominating this woman:

ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᐋᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᑦᑦᑦᑦᑦᑦᑦᑦᑦ ᐋᑦᑦᑦᑦᑦᑦᑦᑦ:

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

ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ	ᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦᑦ	ᐋᐃᑦᐱᑦᑦᑦ
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Candidate:	Nominator:	Seconder:
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ᐅᑦᑦᑦ/Date: _____

