ᐸᐅᒃᑑᑎᑦ
ᐃᓄᐃᑦ ᐊᕐᓇᐃᑦ ᑲᓇᑕᒥ
PAUKTUUTIT
INUIT WOMEN OF CANADA

ᕿᑭᖅᑕᓂᐅᑉ ᓂᒋᐊᓂᑦ

South Baffin Region

ᓂᕈᐊᒐᒃᓴᓐᖑ ᕿᑎᑦᑎᔾᔪᑎ

Nomination Form

ᐸᐅᒃᑑᑎᑦ ᐊᐅᓚᑦᑎᔭᑦ ᑲᑎᒪᔭᖕᒋ ᑦ

Pauktuutit Board of Directors

ᐊᑯᓂᐅᓂᓇᔭᖕᒐᓄᑦ **2017** ᑎᑭᓪᓗᒍ **2019**

For the Term 2017 to 2019

ᓂᕈᐊᒐᑦᓴᓕᐊᖑᔪᖅ: _____

ᑐᕋᕈᑎᖕᒐ: _____

ᐅᖃᓚᐅᑎᖕᒐᑕ ᓱᑲᔪᒃᑯᕈᑎᖕᒐᑕᓗ ᓈᓴᐅᑎᖕᒋᑦ: _____

Name of Candidate (Please Print): _____

Address: _____

Phone/Fax Number: _____

ᓂᕈᐊᒐᑦᓴᐅᓕᕐᑐᖅ: _____

ᑐᕋᕈᑎᖕᒐ: _____

ᐅᖃᓚᐅᑎᖕᒐᑕ ᓱᑲᔪᒃᑯᕈᑎᖕᒐᑕᓗ ᓈᓴᐅᑎᖕᒋᑦ: _____

Nominated by (Please print): _____

Address: _____

Phone/Fax Numbers: _____

ᐊᐃᑉᐲᔪᖅ: _____

ᑐᕋᕈᑎᖓ:_____

ᐅᖃᓚᐅᑎᖓᑕ ᓱᑲᔪᒃᑰᕈᑎᖏᑕᓗ ᓈᓴᐅᑎᖏᑦ: _____

Seconded by (Please Print): _____

Address:_____

Phone/Fax Number:_____

ᑎᑎᕋᕐᓗᑎᑦ ᓱᒻᒪᑦ ᓂᕈᐊᒐᔅᓴᙱᖅᑎᑦᑐᒪᒻᒪᖕᒑᖅᐱᐅᒃ ᑖᓐᓇ ᐊᕐᓇᖅ:
Explain the reason why you are nominating this woman:

_____

_____

_____

_____

_____

ᓂᕈᐊᒐᕐᓴᓕᐅᕈᑎᑦ ᐊᖏᖅᑕᐅᓯᒪᓂᖏᑦ ᓂᕈᐊᒐᕐᓴᙱᖅᑎᑕᐅᔪᒥᑦ (ᐊᑎᓕᐅᖅᑕᐅᓯᒪᔭᕆᐊᓖᑦ ᓂᕈᐊᒐᔅᓴᙱᖅᑎᑕᐅᔪᒥᑦ):
Nomination accepted by the candidate (Signature of Candidate Required)

_____

ᓂᕈᐊᒐᕐᓴᙱᖅᑎᑕᐅᔪᖅ	ᓂᕈᐊᒐᕐᓴᙱᖅᑎᑦᑎᔪᖅ	ᐊᐃᑉᐱᔪᖅ
Candidate	**Nominator**	**Seconder**

ᐅᑦᓗᖓᓂ/**Date:** _____

ᐅᔾᔨᕆᔭᐅᔭᕆᐊᓕᒃ:
ᐊᒥᓱᓕᐊᖑᔪᓐᓇᖅᑐᑦ ᑖᒃᑯᐊ ᑐᓂᐅᖅᑲᕐᑕᐅᓗᑎᒃ ᐱᑎᑕᐅᔪᒪᔪᓄᑦ.
ᐊᕐᓇᐃᑦ ᐃᓄᐃᑦ ᑭᓯᐊᓂ ᓂᕈᐊᒐᑦᓴᙵᖅᑎᑦᑎᔪᓐᓇᖅᑐᑦ ᐊᒻᒪᓗ ᐊᕐᓇᐃᑦ ᐃᓄᐃᑦ
ᓂᕈᐊᒐᑦᓴᙵᖅᑎᑕᐅᔪᓐᓇᖅᑐᑎᒃ ᐸᐅᒃᑑᑎᒃᑯᑦ ᑲᑎᒪᔨᖕᒋᓐᓄᑦ.

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

ᑖᒃᑯᐊ ᑕᑕᑎᕆᐊᓖᑦ ᓱᑲᔪᒃᑯᑦ ᐊᐅᓪᓚᖅᑎᓪᓗᒋᑦ 5:00-ᒧᐊᓚᐅᙱᓐᓂᖓᓂ, ᕕᕐᕈᐊᕆ 24, 2017
ᑐᖕᒐᓂ, ᐅᕗᖓ ᓱᑲᔪᒃᑰᕈᑎᖓᓐᓄᑦ: 613-238-1787
PLEASE FAX THESE FORMS BY 5PM (EST), FEBRUARY 24, 2017
TO: 613-238-1787