

## **ELECTED DIRECTOR NOMINATION FORM ANNUAL GENERAL MEETING - MAY 2021**



This form is to be filled by applicants who wish to be elected to the Board of Bowls Tasmania.

Section 1   Contact inf		
Title:	Given names:	
Surname:		
Email address:		<u> </u>
Address:		
Suburb:		Postcode:
State/territory:		
Home phone:	Work pl	hone:
Mobile phone:		
Section 2   Nomination	n information	
as an employee of BT	or a member Association or as a	nat I do not hold a disqualifying position director with a member Association. If I acknowledge that I will immediately g position.
Γο be filled in by the ι	nominator:	
, member of the		Bowls Club nominate
	for the position of Elected [	Director of Bowls Tasmania.
Signed:		
Nominator	Name	Date
Nominee	Name	 Date

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## Section 3 | Member Association confirmation

1.	on behalf of	(member Association) confirm	
		ancial full member of a bowling club	
and has no disputes or financia		a.iolai tali ilionizoi oi a zottiilig olaz	
and has no disputes of infantial	r payments penaing.		
Member Association	Name	Date	
Section 4   Application form			
Please answer questions 1 to 4	to be considered for the	e position as elected director.	
Please address the following	eligibility criteria.		
Ability to demonstrate of the state of	one of the following (plea	ase circle one):	
(a) Board experience; or	- "		
(b) Knowledge of the role	of a director		
Please detail below how you n	neet this requirements:		
2. In addition to the above	e, please demonstrate o	ne of the following experiences (please	
circle one):			
(a) Business experience –	management level or al	pove; or	
(b) Bowls administration e	xperience		

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3.	Please outline any previous board history and experience:
4.	Please outline any applicable knowledge/networks which may assist you in the position of elected director:
5.	Please provide any additional information/comments in support of your application:

Please submit the form above with your CV to Regional Secretary by  ${\bf COB~May~18^{th},~2021}$ . Late applications will not be accepted.