

Schedule 5

CANDIDATE for NATIONAL COUNCIL MEMBER NOMINATION FORM

(Election at the FIEH AGM)

Candidates must only be nominated by voting members.

CANDIDATE

Name: _____ Email: _____

Address: _____

Postal Box Number: _____

Phone contact #s: _____

I, _____, consent to be a candidate
for a position on the executive of the Fiji Institute of Environmental Health as a
_____ candidate.

CONSENT

- ☐ I have read the Constitution and Guides and agree to support the purposes of FIEH
- ☐ I have read and agree to the description and duties of Executive Members

(Signature)

(Date)

SPONSORS (2 required)

1. Nominated by: _____, a
member of _____,
do hereby nominate this candidate for election to the Executive of the Fiji Institute of
Environmental Health.

(Signature of sponsor)

(Date)

2. Nominated by: _____, a
member of _____,
do hereby nominate this candidate for election to the Executive of the Fiji Institute of
Environmental Health.

(Signature of Sponsor)

(Date)

Note: The original of this nomination paper can be scanned and emailed to
fieh94@gmail.com or snail mailed to the Fiji Institute of Environmental Health, P. O.
Box 11210, Vivrass Plaza, Laucala Beach Estate, Nasinu.