



Saint Mary Self – Help Charity Association of the GTA
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NOMINATION FORM (2018 - 2021 Term)

7 Executive committee and 2 Council of Elders will be elected by members of the association at the Annual General meeting scheduled on **Saturday May 26, 2018**. The Nomination/Elections Committee is therefore seeking nominations from members in good standing to fill these positions. **Article 4.2: A member in good standing is one who has paid his/her registration fee and made uninterrupted monthly membership fees for at least six months.**

I, _____ (first name, last name)

Member of the Association since _____ (month /year) nominate the following individuals:

Nominees for Executive Committee

1. _____
 First Name Last Name Phone #

Tell us why you've nominated this individual?

2. _____
 First Name Last Name Phone #

Tell us why you've nominated this individual?

3. _____
 First Name Last Name Phone #

Tell us why you've nominated this individual?

Nominees for Council of Elders

1. _____
 First Name Last Name Phone #

2. _____
 First Name Last Name Phone #

Nominator's Signature: _____ Date: _____

CANDIDATES DECLARATION:

I accept the nomination and fully understand and commit to the Association mission and vision to help each other both in life and in death including helping those unable to help themselves.

Nominees for Executive Committee

1. Name _____ Member since: _____ (month / year).

Signature: _____

Date: _____

2. Name _____ Member since: _____ (month / year).

Signature: _____

Date: _____

3. Name _____ Member since: _____ (month / year).

Signature: _____

Date: _____

Nominees for Council of Elders

1. Name _____ Member since: _____ (month / year).

Signature: _____

Date: _____

2. Name _____ Member since: _____ (month / year).

Signature: _____

Date: _____

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NOTE: Please provide at least one nominee per table and return the Nomination **Form by April 26, 2018**

Completed Form can be sent via one of the following methods:

1. Email to: nominations@saintmaryselfhelp.ca
2. Mail to: 700 Lawrence Avenue West, Toronto, ON M6A 3C8 P.O Box 58104 Stn. R
3. Scan / take a picture of the completed form and text it to: 647-624-6345
4. Use the locked and secure drop-off box that is located in the Association Office located inside Abraham Adarash.
5. Return in person to one of the Nomination Committee members listed below

Nomination Committee members: Aster Shurte, Alemayehu Ayele, Etagegnehu Woldeab, Mimi Atnafu, Mekbib Zegaye

For Office Use Only

Date Received _____

Received: ____ in Person ____ by Mail ____ Text ____ Dropped off