



UNIFOR
Local25

NOMINATION FORM

Nominee's Name (Print) _____

Address (Home) _____

Phone (Home) – _____ (Work) – _____

Work Centre – _____

I accept the nomination for the position of _____ and in so doing agree to accept the responsibilities of that position and to look after the interests of Unifor Local 25 and its members if elected.

Nominee's Signature _____ Date _____

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We the undersigned members of Unifor Local 25 do hereby enter this candidate into nomination for the position of _____. In so doing, we have complied with the election rules of this Local.

| Nominators Name (Print) | Signature | Work Centre |
|-------------------------|-----------|-------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Note: A minimum of three (3) nominators are required and candidates as well as

Nominators must be Local 25 members in good standing.

Please return form to Local 25 Office.

Fax # 416-596-1626