

Nomination Form for IS CJ Election 2017

IS CJ Voting Member Name _____

Phone: _____ E-mail: _____

IS CJ Voting Member Signature: _____ Date: _____

I hereby nominate the following individual(s) for the following position(s).

Nomination 1

Name of Nominee: _____ Phone: _____

Address: _____ E-mail: _____

Indicate Position for nomination (Board of Trustees or Board of Overseers): _____

Nominee Qualifications: _____

(THIS SECTION FOR OVERSEERS USE ONLY) Eligibility and Acceptance of Nomination to be verified by the Overseers based on IS CJ Constitution eligibility criteria.

Eligible / Ineligible

Overseer Signature: _____

Nomination 2

Name of Nominee: _____ Phone: _____

Address: _____ E-mail: _____

Indicate position for nomination (Board of Trustees or Board of Overseers): _____

Nominee Qualifications: _____

(THIS SECTION FOR OVERSEERS USE ONLY) Eligibility and Acceptance of Nomination to be verified by the Overseers based on IS CJ Constitution eligibility criteria.

Eligible / Ineligible

Overseer Signature: _____

Nomination 3

Name of Nominee: _____ Phone: _____

Address: _____ E-mail: _____

Indicate position for nomination (Board of Trustees or Board of Overseers): _____

Nominee Qualifications: _____

(THIS SECTION FOR OVERSEERS USE ONLY) Eligibility and Acceptance of Nomination to be verified by the Overseers based on IS CJ Constitution eligibility criteria.

Eligible / Ineligible

Overseer Signature: _____

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Nomination 4

Name of Nominee: _____ Phone: _____

Address: _____ E-mail: _____

Indicate position for nomination (Board of Trustees or Board of Overseers): _____

Nominee Qualifications: _____

(THIS SECTION FOR OVERSEERS USE ONLY) Eligibility and Acceptance of Nomination to be verified by the Overseers based on IS CJ Constitution eligibility criteria.

Eligible / Ineligible

Overseer Signature: _____

Nomination 5

Name of Nominee: _____ Phone: _____

Address: _____ E-mail: _____

Indicate position for nomination (Board of Trustees or Board of Overseers): _____

Nominee Qualifications: _____

(THIS SECTION FOR OVERSEERS USE ONLY) Eligibility and Acceptance of Nomination to be verified by the Overseers based on IS CJ Constitution eligibility criteria.

Eligible / Ineligible

Overseer Signature: _____

This form may be photocopied and feel free to use attachments if more space is required.