

# STRONGER DONCASTER ELECTION

## Nomination Form

### CANDIDATE DETAILS

Name:	
Organisation:	
Address:	
Telephone:	
Email:	

### DECLARATIONS

#### Candidate

I agree to be nominated. I understand the expectation that will be made of me if elected. I have read and understand the Role Description for this position and if elected will represent the sector and the Community Empowerment Network.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**In order for this nomination to be considered as valid please send a statement of no more than 500 words in support of your nomination, detailing why you are a suitable candidate for this position. This statement can be emailed to [soneill@doncastercvs.org.uk](mailto:soneill@doncastercvs.org.uk) or included with this form (if possible, please provide an electronic version).**

#### Organisation

I confirm that this nomination is supported by the above organisation (This should be the Manager, Chair or Chief Officer of the group/organisation).

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

#### PLEASE RETURN TO:

Samantha O'Neill  
FREEPOST RLSZ-TBYS-EHEG  
Doncaster CVS, 5-6 Trafford Court, Doncaster, DN1 1PN

