# Blind Citizens Australia

# Nomination Form for 2020 Elections

This form should be read in conjunction with the “Notice of Annual General Meeting” which has been sent to all members of BCA and is available at www.bca.org.au.

* Only Full Members of Blind Citizens Australia, as at 30 June 2020, can nominate, be nominated, or second members wishing to stand for election.
* To be nominated, nominate or second a nomination for a National Policy Council position, members must be residents of the State or Territory concerned.
* Nominations should be in Microsoft Word or text format and must reach the Company Secretary by 5:00pm on Monday, 19 October 2020.
* Nominations should be accompanied by a statement in support of the nomination (no more than 300 words).
* Nomination form and accompanying statement should be sent to [companysecretary@bca.org.au](mailto:companysecretary@bca.org.au)

Nominee Details

|  |  |
| --- | --- |
| Full name: |  |
| Phone: |  |
| E-mail: |  |
| Usual state of residence: |  |
| Place an asterisk to the right of position(s) for which you wish to nominate | Director |
| NPC Representative ACT |
| NPC Representative NSW |
| NPC Representative TAS |
| NPC Representative WA |
| Nomination Date: |  |

Nominator Details

|  |  |
| --- | --- |
| Full name: |  |
| Phone: |  |
| E-mail: |  |
| Usual state of residence: |  |
| Place an asterisk to the right of position(s) for which you wish to nominate the candidate named above. | Director |
| NPC Representative ACT |
| NPC Representative NSW |
| NPC Representative TAS |
| NPC Representative WA |
| Date of Endorsement: |  |

Seconder Details

|  |  |
| --- | --- |
| Full name: |  |
| Phone: |  |
| E-mail: |  |
| Usual state of residence: |  |
| Place an asterisk to the right of position(s) for which you wish to second the nomination of the candidate named above. | Director |
| NPC Representative ACT |
| NPC Representative NSW |
| NPC Representative TAS |
| NPC Representative WA |
| Date of Endorsement: |  |

|  |  |  |
| --- | --- | --- |
| FOR OFFICE USE ONLY | | |
|  | Verified By | Date: |
| Nominee |  |  |
| Nominator |  |  |
| Seconder |  |  |