



NOMINATION FORM

CANDIDATE INFORMATION

I hereby nominate:

_____ *Candidate Name* _____ *PSAC ID Number*

for the office of _____
(print name of office)

NOMINATOR INFORMATION

_____ *Nominator Name* _____ *Signature* _____ *Local/Branch*

Date: _____

SECONDER INFORMATION

_____ *Secunder Name* _____ *Signature* _____ *Local/Branch*

Date: _____

IMPORTANT NOTES

1. Candidate Confirmation Required:

Each nominee must confirm in writing, received no later than **12:00 p.m. on Tuesday, July 21, 2026**, that they are willing to stand for office. Forms need to be sent to UCTE-Convention@psac-afpc.com.

2. Eligibility:

Both the nominator and seconder must be members in good standing of UCTE.

3. Privacy & Confidentiality:

The sharing of members' email addresses is done in compliance with PSAC Privacy and Confidentiality policies. These email addresses are provided **solely** for the specific and exclusive purpose of the UCTE Convention election, and they must not be communicated, disclosed, or used for any other purpose.

4. Use of Email Addresses:

The signatory below confirms they will:

- use member email addresses solely for the UCTE Convention election;
- protect confidentiality by using the **blind copy (BCC)** function for all communications;
- delete all email addresses after the conclusion of the election



CANDIDATE CONFIRMATION OF WILLINGNESS TO STAND

I, _____
confirm that I will stand for election to the office of: _____

I confirm that I will use the provided member email addresses solely for my election campaign, will employ the blind copy (BCC) function when using member email addresses, and will delete the list/database of these addresses at the conclusion of the UCTE Convention election.

Signature: _____

Date: _____

FOR NOMINATIONS COMMITTEE USE ONLY

Received by:

Nominations Committee Member

Signature

Date: _____